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# ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

FOR THE YEAR

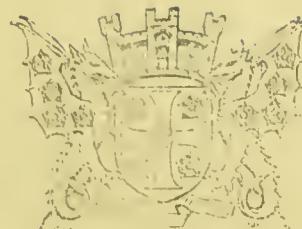
1948

JAMES L. RENNIÉ,

M.D., F.R.F.P.S. (Glasgow), D.P.H.,  
MEDICAL OFFICER OF HEALTH.



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*Carlisle :*

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*To His Worship the Mayor, and to the Aldermen and Councillors  
of the City and County Borough of Carlisle.*

MR. MAYOR, LADIES AND GENTLEMEN,

I have the honour to present my report on the health of the City for the year 1948.

This year saw the introduction of the National Health Service Act, 1946, which altered to a considerable extent the work carried out by Local Health Authorities. The Hospitals vested in the Minister of Health on the 5th July, but the Council acted as agents for the Regional Hospital Board until the end of the year. The report has been set out in Sections, one (Section IV) being devoted to the Services provided by the Local Health Authority under the National Health Service Act.

#### *Section I. Vital Statistics.*

The Registrar-General estimates that the mid-year population has increased by 1,960 to 65,580. A fall in the birth-rate from the record level of 22.1 per 1,000 in 1947 to 18.57 per 1,000 total population has taken place. The general death-rate fell to 12.00 per 1,000 of the population. Two deaths were the result of child-birth but neither were preventable. It is gratifying to note that the infantile mortality rate has fallen to 25.45 per 1,000 live births; the lowest recorded for the City.

#### *Section II. Sanitary Circumstances.*

The shortage of houses still necessitates a considerable degree of overcrowding and the occupation of properties which, by pre-war standards, are unfit for human habitation.

The inspection and supervision of food supplies, catering establishments, etc., was continued throughout the year. In these days when many more people eat in canteens and other catering establishments the risk of food borne disease has increased, and there is therefore a constant need to impress on personnel in such establishments the importance of hygienic handling and storage of food.

### *Section III. Occurrence and Control of Infectious Diseases.*

The incidence of infectious disease was not as great as in 1947, and fortunately there was no epidemic prevalence of poliomyelitis. Diphtheria immunisation was continued at the Council's Clinics, and, from the 5th July, 22 medical practitioners who had indicated their willingness to participate in the Council's scheme also undertook the immunisation of children. 77.2 per cent of the children aged 1-15 years have been immunised against this disease. There were 3 cases of confirmed diphtheria in the City, but none of these was in an immunised child.

Although all the Hospitals passed to the Regional Hospital Board on 5th July, this Authority continued to act as agents for the Board, and Dr. Craig was in clinical charge of the Fever Hospital until the end of the year.

The number of new cases of Pulmonary Tuberculosis increased during the war years, and there has been little diminution in the incidence of this form of the disease. The shortage of sanatorium beds, coupled in many cases with overcrowded conditions in the home, make the control of this disease a matter of no little difficulty. The granting of housing priority by the Allocation of Houses Committee where this was necessary to prevent the spread of Pulmonary Tuberculosis has been greatly appreciated.

### *Section IV. Services provided under Part III of the National Health Service Act.*

Most of the services in this section were already provided by the Council, but it has been necessary to make adjustments to maintain smooth running.

One Infant Welfare session per week was inaugurated at Currock Community Centre during the year, but on account of staffing difficulties it was not possible to open other peripheral clinics.

The Health Visitors' duties have been expanded, and they are now responsible not only for children, but for giving advice

where necessary to all members of the community, and in this connection close liaison has been maintained between the Health Visitors and the Almoners' Department at Hospitals in the City.

Home Nursing is now the responsibility of the Local Authority, and since July the Carlisle District Nursing Association has been acting as agents for the City Council.

The Ambulance Service has had to deal with a greatly increased number of calls since July, 1948. Lack of suitable vehicles was a great handicap, and in order to meet the basic requirements of the Service it was actually necessary to hire one ambulance. By the end of the year, however, delivery of new vehicles had commenced.

The Home Help Service was inaugurated at a meeting in the Town Hall on 20th October, 1948. This service is still in its infancy, and it will be some time before it becomes properly settled down, but by the end of the year much useful assistance had been given to householders in the City.

As from the 5th July the Health Department had to undertake duties under the Lunacy and Mental Treatment Acts and the Mental Deficiency Acts, which were formerly discharged by the Social Welfare Committee and the Joint Committee for Mental Deficiency. The home visitation has been carried out by the staff of the Cumberland and Carlisle Mental Welfare Association as agents for the Council.

The additional services which have had to be operated since the appointed day have greatly increased the administrative work of the department for which the transference of hospitals to the Regional Hospital Board will by no means compensate.

#### *Section V. General Provision of Health Services, etc.*

The general provision of hospital and laboratory services have been little changed, except for the fact that the Carlisle Dispensary no longer functions as a voluntary institution. The Children's Act, 1948, and the National Assistance Act,

1948, have, from 5th July, produced administrative changes in the Health Department which have been noted in the text of the report. The Medical Officer of Health is Medical Advisor of the Children's Committee and Chief Officer of the Welfare Services Committee.

#### *Section VI. Sanitary Inspector's Report.*

The report of the Chief Sanitary Inspector follows along the usual lines, and represents much work which is, of course, largely routine in character. Records of visits and a summary of work accomplished are appended, though it must be stated that the Inspectors are frequently consulted and give advice on divers matters, much of which goes unrecorded.

I desire to record my sincere thanks and appreciation for the willing service and excellent co-operation of all members of the staff of the Department. The friendly co-operation of the staffs of the Regional Hospital Board, Hospital Management Committee and Hospitals has gone far to make for smooth working and is very much appreciated.

To the Chairman and Members of the Health Committee I desire to express my thanks for the help, encouragement and support they have given to me throughout the year. I would also like to record my indebtedness to the Town Clerk and other Chief Officials and their staffs for willing co-operation and assistance.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

JAMES L. RENNIE,

*Medical Officer of Health.*

## **SECTION I.**

---

### **Vital Statistics.**

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## Vital Statistics.

Area (acres) .. . . . .. ..	4,488
Population (1948), Estimate of Registrar-General	65,580
Rateable Value .. . . . .. ..	£429,043
Sum represented by a Penny Rate .. ..	£1,714

### EXTRACTS FROM VITAL STATISTICS OF THE YEAR.

Live Births—	Total.	M.	F.	
Legitimate ..	1146	595	551	
Illegitimate ..	72	38	34	
				Birth-rate, 18.57
				per 1,000 population.
Still-births ..	35	22	13	
				Rate 27.93 per 1,000 total births.
Deaths .. . .	787	410	377	
				Death-rate, 12.00 per 1000 population.
Deaths from diseases and accidents of pregnancy and childbirth—				
From Sepsis .. .. .. ..				1
From other causes .. .. .. ..				1
Death-rate of Infants under one year of age per 1,000 live births—				
Legitimate .. .. ..			26.2	
Illegitimate .. .. ..			13.9	
				Total, 25.45
Deaths from Whooping Cough (all ages) .. ..				—
" Diarrhoea (under 2 years of age) .. ..				4

### POPULATION.

The estimate of the population at mid-year 1948, supplied by the Registrar-General, was 65,580, and this figure has been used in making the various calculations in the report.

**BIRTHS.***LIVE BIRTHS.*

The total number of live births registered in the City during the year was 1,777, a decrease of 117. Of these 559 were transferable out of the City and the actual number of City live births was therefore 1218; giving a live birth-rate of 18.57 per 1,000 population compared with a rate of 23.1 per 1000 in 1947. This rate is more consistent with the birth rates previous to 1946.

*ILLEGITIMATE LIVE BIRTHS.*

The number of City illegitimate live births registered was 72, or 59.11 per 1000 of the total live births.

*STILL BIRTHS.*

The number of City still-births registered during the year was 35, giving a still-birth rate of 27.93 per 1,000 live and still-births or 0.53 per 1000 population, a slight reduction on the figures for the previous year.

**DEATHS.**

The total number of deaths registered was 1,009 as compared with 1078 in 1947. 39 deaths occurred of persons belonging to the City, in Institutions and other places away from Carlisle, while the deaths of 261 persons not belonging to the City, occurred in public institutions and other places within the City. Excluding the latter figure, and adding the deaths of Carlisle residents which occurred in other districts, a net figure of 787 remains, which is equal to a death-rate of 12.00 per 1,000 of the estimated population at all ages, against 13.22 per 1,000 in 1947.

*MATERNAL MORTALITY.*

Three maternal deaths occurred within the City, two of the deaths being of persons who resided within the City, and on investigation, neither were found to be preventable deaths,

The following Table sets out the Cause and the Ages at Death of 787 persons belonging to the City:—

CAUSE OF DEATH.	NETT DEATHS AT THE SUBJOINED AGES OF "RESIDENTS" WHETHER OCCURRING WITHIN OR WITHOUT THE CITY										TOTAL DEATHS WHETHER OF "RESIDENTS" OR "NON-RESI- DENTS" IN INSTITUTIONS IN THE CITY.
	All Ages	Under 1 year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and up- wards	10	
1	2	3	4	5	6	7	8	9	10	11	
All Causes	781	30	4	—	10	15	46	180	446	515	
Certified	56	1	—	—	—	—	1	25	29	10	
Uncertified											
Typhoid and Paratyphoid											
Fever		—	—	—	—	—	—	—	—	—	
Cerebro-Spinal Fever		—	—	—	—	—	—	—	—	—	
Scarlet Fever		1	1	—	—	—	—	—	—	—	2
Whooping Cough		—	—	—	—	—	—	—	—	—	1
Diphtheria		1	—	—	—	1	—	—	—	—	1
Tuberculosis of Respiratory System	30	—	—	—	—	7	10	12	3	14	
Other forms of Tuberculosis	2	—	1	—	—	—	—	1	—	4	
Syphilis Disease	4	—	—	—	—	—	—	2	—	1	
Induena	1	—	—	—	—	—	—	—	—	1	
Measles	—	—	—	—	—	—	—	—	—	—	
Acute Poliomyelitis and Pontoencephalitis	2	—	—	—	1	1	—	—	—	—	3
Acute Infectious Encephalitis	1	—	—	—	—	—	—	1	—	—	4
Cancer of Buccal Cavity, Oesophagus and Uterus	13	—	—	—	—	—	2	6	5	6	
Cancer of Stomach and Duodenum	24	—	—	—	—	—	—	8	16	12	
Cancer of Breast	12	—	—	—	—	—	—	5	7	3	
Cancer of all Other Sites	72	—	—	—	—	—	3	33	36	56	
Diabetes	5	—	—	—	—	—	—	2	3	5	
Extra Cranial Vascular Lesions	99	1	—	—	—	—	—	—	23	75	27
Heart Disease	238	—	—	—	—	1	6	57	174	78	
Other Diseases of the Circulatory System	51	—	—	—	—	—	—	5	46	36	
Bronchitis	31	—	—	—	1	2	2	3	23	8	
Pneumonia	23	4	—	—	—	—	3	6	10	21	
Other Respiratory Diseases	9	1	1	—	—	—	2	3	2	14	
Ulceration of the Stomach and Duodenum	6	—	—	—	—	—	—	8	—	3	
Diarrhoea (under 2 years)	4	4	—	—	—	—	—	—	—	5	
Appendicitis	1	—	—	—	—	—	—	1	—	—	
Other Digestive Diseases	15	—	—	—	—	—	2	6	7	45	
Nephritis	18	—	—	—	—	—	1	5	12	11	
General and Post Abortive	—	—	—	—	—	—	—	—	—	—	
Sepsis	1	—	—	—	—	—	1	—	—	1	
Other Maternal Causes	1	—	—	—	—	1	—	—	—	2	
Premature Birth	7	7	—	—	—	—	—	—	—	—	14
Congenital Malformations, Birth Injuries, Infantile dis.	13	12	—	—	1	—	—	—	—	—	20
Suicide	10	—	—	1	—	1	5	2	—	3	
Road Traffic Accidents	7	—	1	—	1	—	—	—	—	5	10
Other Violent Causes	9	1	—	—	—	—	1	4	3	7	
All Other Causes	76	—	1	—	5	2	8	18	42	77	
TOTALS	787	31	4	—	10	15	47	205	475	525	

### *INFANTILE MORTALITY.*

The total number of deaths under one year of age of City residents was 31, giving an Infantile Mortality Rate of 25.45 per 1000 live births. This compares favourably with the rate of 34 per 1000 related births for the whole of England and Wales.

The number of deaths of legitimate children under one year of age was 30, equal to 26.2 per 1,000 legitimate live births.

Two of the deaths of children under 4 weeks were due to dysentery caused by organisms of the salmonella group. A small outbreak of this disease occurred in the City Maternity Hospital (see page 33).

The number of deaths of illegitimate children was one, equal to 13.9 per 1,000 illegitimate live births.

It is gratifying to note that only one illegitimate child under one year died during the year, and this reflects on the better care now given to these unfortunate children.

The Infantile Mortality rate of 25.45 per 1,000 live births is the lowest that has ever been recorded in Carlisle. The table on the following page sets out the Infantile Mortality rates of the City, as compared with the figures for the whole of England and Wales, and the County Boroughs and Great Towns for the Census Years from 1901 to 1931 and the consecutive years up to 1948.

**Deaths under 1 year per 1000 Live Births \*England and Wales and Great Towns.**

Year.	City.	England & Wales	County Boroughs and Great Towns (including London)	
			—Number of towns shown in brackets.	
1901	129.0	151	168	(33)
1911	145.0	130	140	(77)
1921	105.3	83	87	(96)
1931	65.2	66	72	(107)
1932	81.6	64	70	(118)
1933	72.2	63	68	(,,)
1934	60.9	59	63	(121)
1935	67.6	57	62	(,,)
1936	77.6	59	63	(122)
1937	49.1	58	62	(125)
1938	46.3	53	57	(126)
1939	71.0	51	53	(,,)
1940	66.1	57	59	(,,)
1941	68.6	60	63	(,,)
1942	46.5	51	56	(,,)
1943	38.9	49	54	(,,)
1944	50.5	45	48	(,,)
1945	56.3	46	49	(,,)
1946	59.6	43	46	(,,)
1947	56.5	41	44	(,,)
1948	25.45	34	39	(,,)

\*Based on related live births from 1931 for England and Wales, and from 1942 for the Great Towns.

The Infantile Mortality rate is one of the indices of the efficiency of the preventive medical service, and it was on account of the high Infant Mortality rate that Local Authorities were originally empowered to employ Health Visitors. It is well in these days of perpetual change to realise that the social circumstances and preventive services in the country had been able to reduce the Infantile Mortality rate to its present level, before the introduction of the measures under the National Health Service Act, 1946.

A table showing the causes of the 31 infant deaths, also giving the age and the month in which the deaths occurred is given on page 15.

A summary of the Vital Statistics as regards births and deaths is given in the following table:—

**Table showing statistics relative to births and deaths for the years 1944 to 1948.**

YEAR.	Registrar-General's Estimate of Population to Middle of each Year	BIRTHS			TOTAL DEATHS REGISTERED IN THE DISTRICT		TRANSFERABLE DEATHS		NETT DEATHS BELONGING TO THE DISTRICT			
		Uncorrected Number	Nett Number	Rate	Number	Rate	of Non-residents registered in the District	of Residents not registered in the District	Under 1 Year of age	At All Ages		
1	2	3	4	5	6	7	8	9	10	11	12	13
1944	60,250	1505	1187	19.7	983	16.3	229	32	60	50.5	786	13.0
1945	59,960	1368	1101	18.4	971	16.2	233	48	62	56.3	786	13.11
1946	63,130	1577	1307	20.7	1070	16.9	231	31	78	59.6	870	13.77
1947	63,620	1894	1469	23.1	1078	16.9	283	46	83	56.5	841	13.22
1948	65,580	1777	1218	18.57	1009	15.4	261	39	31	25.45	787	12.00

### INQUESTS.

During the year the City Coroner held 38 inquests. Of this number 24 related to deaths of persons who resided within the City, and 14 to persons who resided in other districts but who died within the City. 3 related to children under five years of age.

### UNCERTIFIED DEATHS.

61 deaths were registered in which no certificate was given by a medical practitioner, and in which no inquest was held. 53 of these were in respect of City residents.

During 1947, 70 such deaths were registered.

### MORTUARY.

52 bodies were removed to the Public Mortuary, post-mortem examinations being made in 43 instances.

Deaths from stated causes, at various ages and in various months, of children under 1 year of age.

## DEATHS DUE TO CANCER.

The accompanying table shows the age and sex distribution of the 121 persons who died from Cancer of various organs during the year under review. The Mortality rate from this disease being 1.8 per 1000 of the population.

Site of Disease	AGE GROUPS.										Totals								
	Under One Year		1—25		25—35		35—45		45—55		55—65		65—75		Over 75				
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.			
Buccal Cavity and Pharynx	—	—	—	—	—	—	—	—	—	—	4	—	2	—	6	—			
Digestive Organs and Peritoneum	—	—	—	—	—	—	1	—	6	2	10	3	15	9	9	6	41	20	
Respiratory System	—	—	—	—	—	—	—	—	5	—	7	—	3	—	1	—	16	—	
Uterus	—	—	—	—	—	—	1	—	1	—	3	—	3	—	—	—	—	8	
Other female genital organs	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	—	2	
Breast	—	—	—	—	—	—	—	—	—	1	—	4	—	3	—	4	—	12	
Male genital organs	—	—	—	—	—	—	—	—	—	—	—	2	—	1	—	3	—	5	
Urinary organs	—	—	—	—	—	—	—	—	—	—	1	—	2	—	2	—	—	—	
Skin	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	
Brain and Nervous System	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other organs	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Totals	—	—	—	—	—	—	1	2	2	13	9	17	13	26	14	14	10	72	49

## DEATHS FROM CANCER, 1939-48.

1939.	1940.	1941.	1942.	1943.	1944.	1945.	1946.	1947.	1948.
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98 ..	97 ..	114 ..	107 ..	104 ..	113 ..	128 ..	115 ..	111 ..	121 ..
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## **SECTION II.**

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### **Sanitary Circumstances.**



## Sanitary Circumstances.

### WATER SUPPLY.

The water supply of the area has been satisfactory, both in quantity and quality, and an abundant supply has been maintained in the Corporation's area of supply throughout the year.

Regular bacteriological examinations have been made of the water in its various stages of treatment from the raw state to the final supply. In all, 28 samples of the fully treated water have been examined bacteriologically, and all show the water to be highly satisfactory in this respect.

The chemical analyses of the water afford no evidence of pollution by undesirable drainage of any kind, and it is of good and wholesome quality for human consumption. In all 18 samples of the water were subjected to a chemical analysis during the year.

A test for plumbo-solvency is included as part of every chemical analysis, with the following results :—

Lead eroded or dissolved after 24 hours at 20° C. :—

Nil in 17 samples.

0.006 parts per 100,000 in 1 sample.

pH correction was immediately applied after this result.

No action was necessary to combat contamination.

Water was supplied to households as follows :—

(a). Direct to the houses :

No. of houses supplied ..	18565
Estimated Population Supplied ..	63830

(b). By means of Standpipes :

No. of houses supplied ..	508
Estimated Population ..	1750

The subjoined Table shows the total quantity of water supplied and the quantity per head per day for the years 1947 and 1948.

			No. of Gallons.	Gallons per head per day.
1947	..	..	1,243,480,000	42.59
1948	..	..	1,245,320,000	42.52

Samples are taken periodically from a domestic tap and are submitted for bacteriological and chemical examination. The following table and the table on page 21 show the results of samples examined during the year.

**Table showing bacteriological examinations of Water Samples.**

Date when sample was taken.	No. of Colonies in					
	0.1 M.L.		1 M.L.		10 M.L.	
	At 22° c.	At 37° c.	At 22° c.	At 37° c.	At 22° c.	At 37° c.
16th March . .	—	—	—	—	3	—
14th June . .	—	—	—	—	7	3
30th September	—	—	1	—	13	2
13th December	—	—	4	—	58	9

### **SEWERAGE & SEWAGE DISPOSAL.**

The scheme for the proposed enlarging and modernising of Willow Holme Sewerage Disposal Works (apart from the section to deal with sludge disposal) has been submitted to the Ministry of Health. The Technical Officers of the Ministry require certain amendments to the original scheme. These and the revised estimate will be submitted to the Ministry in the near future. It is likely that the scheme will then be approved in principle.

New Sewers in connection with the development of Housing Estates have been completed at Upperby and on extension to the Harraby and Belah Estates, and sewer laying operations have been started on a large new site at Upperby, known as the Upperby Village Housing Estate.

The relief Sewerage Scheme for the Harraby district, which was more than half complete a year ago, has now been completed.

**Results of Chemical Analyses of Samples of Water taken from a Domestic Tap.**

RESULTS SHOWN IN PARTS PER 100,000.	11TH MARCH	15TH JUNE	24TH SEPT.	9TH DEC.
Chlorine as Chlorides ..	1.0500	1.1000	1.0000	.9500
Nitrogen as Nitrates ..	.0570	.0286	.0400	.0411
Ammonia .. ..	.0048	.0022	.0040	.0021
Albuminoid Ammonia ..	.0047	.0038	.0052	.0072
Oxygen absorption ..	.1228	.0868	.2456	.2024
Injurious Metals ..	none	none	none	none
Total Solid Matter dried at 100° C. ..	11.0000	10.0000	13.0000	10.0000
Temporary Hardness ..	4.4°	2.4°	2.8°	3.0°
Permanent Hardness ..	4.0°	2.6°	5.2°	4.4°
Free Alumina .. ..	none	none	none	none
P.H. Value .. ..	7.3	7.3	7.3	7.3
Colour of Sample on Hazel Scale .. ..	10.	9.	19.	19.
Appearance in two-foot tube .. ..	Not quite bright.	Not quite bright.	Not quite bright.	Not quite bright.
Odour when heated to 50° C. .. ..	none	none	none	none
Microscopical Examination .. ..	Satisfactory	Satisfactory	Satisfactory	Satisfactory
Lead Dissolved or Eroded	none	none	none	none

## HOUSING.

There are in the City a number of houses, which, by their construction, location and defects, are prejudicial to the health of the occupants. The continued shortage of houses, manpower and materials, however, made it impracticable to deal with these houses, by way of demolition, closure or major re-conditioning.

The Health Statistics relative to housing are as follows :—

Number of new houses erected in the Borough during the year :—

1. Erected by the Local Authority.	Temporary ..	None
	Permanent ..	288
2. Erected by other Persons, or bodies	.. ..	48
3. Houses Demolished	.. .. ..	4

### *Housing Statistics.*

#### *Inspection of Dwelling-houses during the year.*

1. (a) Total number of dwelling houses inspected for housing defects (under the Public Health or Housing Acts)	928
(b) Number of inspections made for the purpose ..	2,139
2. (a) Number of dwelling-houses (included under Sub-head 1 (a) above) which were inspected and recorded under the Housing Consolidated Regulations, 1926 ..	10
(b) Number of inspections made for the purpose ..	16
3. Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation .. .. .. ..	10
4. Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation ..	518

#### *Remedy of Defects during the Year without Service of Formal Notices.*

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers .. .. .. ..	735
Number of back-to-back houses made into through houses .. .. .. ..	None
Number of houses demolished .. .. ..	None

#### *Action under Statutory Powers during the Year.*

A. Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.		
1. Number of dwelling-houses in respect of which notices were served requiring repairs .. .. ..	None	
2. Number of dwelling-houses which were rendered fit after service of formal notices :—		
(a) by owners .. .. .. .. ..	None	
(b) by Local Authority in default of owners .. ..	None	

B.	Proceedings under Public Health Acts :—		
1.	Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	9	
2.	Number of dwelling-houses in which defects were remedied after service of formal notices :—		
(a)	by owners .. . . . .. . .	9	
(b)	by Local Authority in default of owners .. . .	None	
C.	Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—		
1.	Number of dwelling-houses in respect of which Demolition Orders were made .. . . .	None	
2.	Number of dwelling-houses demolished in pursuance of Demolition Orders .. . . .	4	
3.	Number of dwelling-houses in respect of which an undertaking was accepted under Sub-Section (2) of Section 11 .. . . .	None	
D.	Proceedings under Section 12 of the Housing Act, 1936 :—		
1.	Number of separate tenements or underground rooms in respect of which Closing Orders were made ..	1	
2.	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ..	1	

*Housing Act, 1936, Part IV. Overcrowding.*

The Council's scheme for allocation of Corporation houses has as its basis, the degree of overcrowding existing in the applicant's present dwelling. Special circumstances, such as the presence of an open case of Tuberculosis in the family, are taken into consideration and given priority. During the year the Health Department staff were asked to comment upon a large number of applicants, who either verbally, or with the support of medical certificates, alleged a claim to priority on medical grounds. In the case of Tuberculosis, which is a notifiable disease, the Medical Officer of Health is in a position to give direct advice to the Allocation of Houses Committee, but in other cases it is extremely difficult for him to do so.

The number of certificates, for the permitted number of persons who may sleep in a house, issued during the year, was 393.

**ERADICATION OF BED BUGS.**

Complaints were received of vermin infestation at 9 houses. Houses were inspected, tenants advised and insecticide issued to 6 tenants, together with directions for

its proper use. In addition, disinfestation works (insecticide sprayers, etc.) were carried out by the Department at one house, and the Housing Department carried out similar work at twenty-five Council houses.

The furniture and effects of 23 tenants entering into Corporation houses were treated by gas under pressure at the Corporation's Disinfestation Plant.

### **INSPECTION AND SUPERVISION OF FOOD SUPPLIES AND CATERING ESTABLISHMENTS.**

Details regarding the supervision are given in the report of the Chief Sanitary Inspector. (See pages 81-96).

#### *CATERING ESTABLISHMENTS.*

The increase in the number of people having meals in cafés and other catering establishments throughout the country has brought in its train outbreaks of food poisoning. A constant watch has to be kept on these premises to ensure the clean handling of food and utensils. There is, unfortunately, a considerable amount of indifference on the part of some canteen operatives with regard to the thoroughness with which their work is carried out, and constant health education and stimulation will be necessary if reasonable standards of kitchen hygiene are to be achieved and maintained.

#### *MILK SUPPLY.*

The whole of the milk consumed in the City is either Tuberculin Tested or previously subjected to Heat Treatment and its distribution is in the hands of two large dairy Companies. Systematic inspection of all milk supplies, including handling and distribution was carried on throughout the year, special attention being given to the efficiency of the heat treatment plant.

Regular sampling at the place of delivery was done in respect of Tuberculin Tested milk coming from dairy farms within or without the City.

10 producers, occupying 22 cowsheds, were on the Register.

Four hundred and twenty-four samples of milk were procured during the year, sixteen for chemical analysis under the Food and Drugs Act, and four hundred and eight for bacteriological examination under the Milk (Special Designations) Regulations.

Milk bottles taken at various points during the processing of milk were tested for cleanliness, and showed 100% satisfactory results.

Of the samples of milk obtained and submitted for bacteriological examination, the following are the results :

Designation of Milk.	Number Tested.	Satis- factory.	Unsatis- factory.
170 <i>Samples of T.T. Milk.</i>			
Methylene Blue Test ..	170	120	50
Tests of presence of Coliform ..			
Bacilli in 1/100 m.l. ..	170	109	61
Inoculation for Tuberculosis ..	9	9	—
68 <i>Samples of T.T. Milk (taken in course of delivery into the City from farms outside the area)</i>			
Methylene Blue Test ..	68	35	33
Coliform Bacilli ..	68	42	26
42 <i>Samples of Accredited Milk.</i>			
Methylene Blue Test ..	42	33	9
Coliform Bacilli ..	42	35	7
Inoculation for Tuberculosis ..	3	3	—
57 <i>Samples of Pasteurised Milk.</i>			
Phosphatase Test ..	48	48	—
Methylene Blue Test ..	55	55	—
Coliform Bacilli ..	57	27	30
Inoculation for Tuberculosis ..	—	—	—
60 <i>Samples of Heat Treated Milk.</i>			
Phosphatase Test ..	60	60	—
Methylene Blue Test ..	60	60	—
Coliform Bacilli ..	60	42	18
Inoculation for Tuberculosis ..	—	—	—
11 <i>Samples Ungraded Milk.</i>			
Methylene Blue Test ..	11	10	1
Coliform Bacilli ..	11	9	2
Inoculation for Tuberculosis ..	6	6	—
16 <i>Clean Bottles prior to filling (taken at various positions on the plant)</i>			
Coliform Bacilli ..	16	16	—
Bacterial Count ..	11	11	—



## **SECTION III.**

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**Occurrence and Control of Infectious Diseases,  
including Hospital Treatment.**



## Occurrence and Control of Infectious Diseases, including Hospital Treatment.

### INCIDENCE.

The year under review showed a fall in the total number of notifications of Infectious Diseases. This was largely due to a smaller epidemic prevalence of Measles. Scarlet Fever, however, showed an increased number of cases compared with the previous year.

The following table shows the number of cases of Infectious Diseases notified by ages :—

**Table showing the Age Groups of the Cases of Infectious Diseases notified during 1948.**

	Total Number of cases notified.	Number of cases incorrectly notified.	Net Number of cases notified.	Number of Cases notified at various Ages.							Number of notified cases removed to hospital.
				Under 1 year.	1—5 years.	5—15 Years.	15—25 Years.	25—45 years.	45—65 years.	65 and upwards.	
Scarlet Fever ..	161	9	152	2	37	105	4	4	—	—	124
Whooping Cough ..	113	—	113	22	66	25	—	—	—	—	2
Diphtheria ..	4	1	3	—	—	1	2	—	—	—	4
Measles ..	595	1	594	34	347	206	2	4	1	—	28
Pneumonia ..	25	1	24	1	5	2	2	3	9	2	22
Cerebro-spinal Fever ..	1	1	—	—	—	—	—	—	—	—	1
Acute Poliomyelitis ..	3	—	3	—	—	—	1	2	—	—	3
Acute Encephalitis Lethargica ..	—	—	—	—	—	—	—	—	—	—	—
Dysentery ..	1	—	1	—	1	—	—	—	—	—	1
Ophthalmia Neonatorum ..	8	2	6	6	—	—	—	—	—	—	3
Puerperal Pyrexia ..	4	1	3	—	—	—	1	2	—	—	2
Smallpox ..	—	—	—	—	—	—	—	—	—	—	—
Paratyphoid Fever ..	—	—	—	—	—	—	—	—	—	—	—
Typhoid Fever ..	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ..	18	—	18	—	—	—	1	6	9	2	3
Malaria ..	—	—	—	—	—	—	—	—	—	—	—
Pulmonary Tuberculosis ..	69	—	69	—	2	5	21	21	19	1	—
Other forms of Tuberculosis ..	22	—	22	1	3	12	2	3	1	—	—

A total of 1,008 notifications of Infectious Diseases were received during the year, 91 of which related to various forms of Tuberculosis and 917 to other infections.

6 deaths were certified as due to zymotic diseases, equal to a zymotic death rate of 0.09 per 1,000 of the population. This is a very decided reduction in the figure (0.28 per 1,000) for 1947.

We were fortunate to escape an epidemic prevalence of any of the major or more serious notifiable infections and our experience of the previous year with regard to Acute Poliomyelitis was happily not repeated.

#### *SCARLET FEVER.*

The sudden sharp outbreak of this disease during the latter months of 1947 was continued into the spring of the present year, and throughout 1948 there was an increase in the total number of notifications.

81% of cases notified were removed to hospital. This may seem a high proportion to hospitalise, but the social conditions of the population at the present time with the gross overcrowding in most working-class houses necessitates the removal to hospital of many cases which could be otherwise nursed at home.

Clinically the cases were not marked by any undue severity of type, and all, with the exception of one case made a satisfactory recovery.

The fatal case was that of a young baby of 9 months who developed a Broncho-Pneumonia coincident with its Scarlet Fever. It was difficult to determine which was the primary infection.

#### *DIPHTHERIA.*

The rarity of this once deadly disease was repeated throughout the year, but one unfortunate incident occurred which goes to prove the fallacy, present in the minds of some, that Diphtheria has now disappeared for good and that the

necessity for precautions and Immunisation is no longer required.

An otherwise healthy schoolboy of 12 years was admitted to hospital suffering from an overwhelmingly toxic form of Diphtheria. In spite of massive doses of Anti-toxin and Penicillin he died from Cardiac Paralysis on the 8th day of disease.

The object lesson of this tragedy served as a strong stimulus to the few parents in the neighbourhood who had, up till then, refused to have their families protected.

As pointed out in last year's report the routine of Immunisation as recommended by the Ministry of Health continues to be carried out by the Infant Welfare and School Medical Departments. Under the National Health Service Scheme an increasing number of children are being immunised by their family doctors, records and particulars of such treatment being submitted to the Local Health Department. The City continues to show a satisfactory number (77.2%) of children aged 1-15 years who have been immunised against this disease.

4 cases of Diphtheria were notified during the year in one of which diagnosis was not confirmed.

No cases of Diphtheria occurred in Immunised children.

#### *SMALLPOX.*

No cases were notified during the year, and no notices regarding contacts were received from Port Health Authorities.

No vaccinations were undertaken during the year under the Public Health (Smallpox Prevention) Regulations, 1917.

#### *MALARIA.*

No notifications of Malaria were received.

*PNEUMONIA—ACUTE, PRIMARY & INFLUENZAL.*

24 notifications of Pneumonia were received during the year. In 6 instances the disease was stated to be of the Acute Influenzal type and in 18 cases of the Acute Primary variety.

There were 5 deaths from Primary and 1 death from the Influenzal type of this disease.

*INFLUENZA.*

One death was registered as due to Influenza, this being 4 less than in the previous year.

*CEREBRO-SPINAL MENINGITIS*

One notification was received as compared with 5 in the previous year. The case was admitted to hospital but the diagnosis was not confirmed.

*ACUTE POLIOMYELITIS.*

As previously stated there was no epidemic prevalence of this disease, but a few sporadic cases continued to occur.

A total of 3 cases were notified during the year, all of which were admitted to hospital. They all belonged to the adult male age group (20-40 yrs.). All suffered from varying degrees of paralysis, two were discharged from hospital for further orthopaedic supervision and treatment. The remaining case was of the acute bulbar type with respiratory and swallowing paralysis, and died one hour after admission.

*PUERPERAL PYREXIA.*

Three notifications of Puerperal Pyrexia were received, two of which were treated in hospital.

*OPHTHALMIA NEONATORUM.*

Six cases of Ophthalmia Neonatorum were notified by medical practitioners. In 4 instances both eyes were affected but in no case did permanent damage result. Three of the cases were treated in hospital, the nurses of the District Nursing Association undertaking the treatment of the remainder, under the supervision of the doctor in charge of the case.

**Table showing result of treatment of Cases of Ophthalmia Neonatorum.**

Notified	CASES			Vision impaired	Total Blindness	Deaths during treatment	Number still under treatment at end of the year	Number removed from the District					
	Treated		Vision un- impaired										
	At Home	In Hos- pital											
6	3	3	6	—	—	—	—	—					

#### *ACUTE GASTRO-ENTERITIS.*

23 infants, all City residents were admitted to the Infectious Diseases Hospital suffering from this condition.

11 of these cases were removed from the City Maternity Hospital, 3 from the Cumberland Infirmary and 9 were admitted from their own homes.

There were 4 deaths among City children, two of which occurred in young babies under 14 days old who had been transferred from the City Maternity Hospital. The causal organism in both cases was *Bacillus aertrycke*. The other two deaths were in babies 1-2 months old who were admitted from their own homes. In neither of these cases could any definite organism be isolated as the causal factor.

An outbreak of Gastro Enteritis due to *Salmonella typhimurium* (*B. aertrycke*) occurred in the City Maternity Hospital during September and October. Three infants (2 City and 1 County) had Gastro Enteritis and all three died. One County child was, in addition, found on routine examination to be harbouring the organism, but he did not develop symptoms. Another infant who was transferred to the Infectious Diseases Hospital for other reasons later developed the disease and recovered.

Routine examination revealed the organism in the stools of the mother of the first child to be affected. The organism was not recovered from any member of the staff of the hospital or specimens of food, dust, etc., submitted to the laboratory.

After consultation with the Obstetric Consultant it was decided to recommend the closure of the affected section of the hospital. This was carried out and the outbreak came to an end.

#### *SCABIES.*

76 cases of this condition were treated during the year at the Cleansing Centre at the School Clinic.

14 of these were adults, 55 school children and 7 pre-school children.

#### *NOTIFICATION FEES.*

The total amount paid in fees for notification of all notifiable diseases during 1948 was £132 16s. 6d.

#### **INFECTIOUS DISEASES HOSPITAL.**

The introduction of the National Health Services Act, on 5th July, 1948, included in its many changes from existing conditions, the transfer of Infectious Diseases Hospitals from Local Health Authorities to Regional Hospital Boards.

By arrangement with the latter body the Local Health Authority agreed to act as agents for this Hospital till 31st March, 1949.

Thus throughout the year 1948, though the ownership changed, the administrative measures and methods of admission to hospital were not materially altered.

Table giving details of cases treated in Infectious Diseases  
Hospital.

	In Hosp. 1st Jan.	Admitted during year	Dis- charged	Died	In Hosp. 31st Dec.
Scarlet Fever	.. 19 ..	120 ..	130 ..	1 ..	8
Diphtheria	.. ..	— ..	3 ..	2 ..	1 ..
Measles	.. ..	1 ..	34 ..	34 ..	— ..
Rubella	.. ..	— ..	1 ..	1 ..	— ..
Whooping Cough	.. 2 ..	6 ..	7 ..	1 ..	—
Chickenpox	.. ..	— ..	4 ..	4 ..	— ..
Mumps	.. ..	— ..	2 ..	2 ..	— ..
Erysipelas	.. ..	— ..	4 ..	4 ..	— ..
Pneumonia	.. ..	— ..	2 ..	2 ..	— ..
Influenza	.. ..	— ..	6 ..	6 ..	— ..
Cerebro-Spinal Meningitis	I ..	3 ..	3 ..	1 ..	—
Other forms of Meningitis	— ..	3 ..	2 ..	— ..	1
Acute Poliomyelitis	.. ..	9 ..	6 ..	3 ..	—
Acute Gastro Enteritis	1 ..	32 ..	27 ..	6 ..	—
Typhoid Fever	.. ..	1 ..	— ..	— ..	1
Dysentery	.. ..	— ..	5 ..	5 ..	— ..
Puerperal Pyrexia and Other Puerperal Conditions	.. ..	— ..	60 ..	60 ..	— ..
Ophthalmia Neonatorum	— ..	2 ..	2 ..	— ..	—
Pemphigus Neonatorum	— ..	2 ..	2 ..	— ..	—
Tuberculosis	.. ..	5 ..	40 ..	39 ..	2 ..
Miscellaneous	.. ..	2 ..	81 ..	76 ..	4 ..
	—	—	—	—	—
	31 ..	420 ..	414 ..	19 ..	18
	—	—	—	—	—

Of the total of 420 cases admitted to the Infectious Diseases Hospital during the year 298 were City Residents, 118 came from surrounding areas and 4 were Service Cases.

Many of the cases from the surrounding areas were transferred from the General Hospitals within the City where they were already receiving treatment for other conditions and had developed an Infectious Disease necessitating their transfer.

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## TUBERCULOSIS.

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Tuberculosis is the major infectious disease affecting the community. While the number of notifications may be small compared with Measles the morbidity caused by this disease far exceeds that of any of the other notifiable diseases in this country.

### NOTIFICATIONS.

The number of primary notifications of Tuberculosis received during the year was 91, as compared with 104 in 1947. 69 were in respect of Pulmonary Tuberculosis, and 22 of the non-pulmonary type of the disease. 14 additional pulmonary cases, came to the notice of the Medical Officer of Health otherwise than by formal notification, making a total of 105 new cases. The sex incidence of all new cases was :—

			Males		Females
Pulmonary	..	..	41	..	42
Non-Pulmonary	..	..	9	..	13
Total	..	50	..	55	

The following table shows the number of formal notifications, number of deaths and death-rate during the past five years.

Year	Formal Notifications		Number of Deaths	Death Rate per 1000 of population.
	Pulmonary	Non-Pulmonary		
1944	86	26	48	0.8
1945	73	24	41	0.68
1946	90	14	49	0.77
1947	82	22	47	0.74
1948	69	22	32	0.48

The distribution of new cases formally notified during the year by age, sex and type is given in the following table:—

**Summary of notifications during the period from the 1st January, 1948 to 31st December, 1948**

Age periods	Number of Primary Notifications of new cases of Tuberculosis.											Total (all ages)
	0-1	1-5	5-10	10-15	15-20	20-25	25-35	35-45	45-55	55-65	65 & upwards	
Pulmonary—												
Males ..	—	—	—	—	1	4	8	3	8	7	—	31
Females ..	—	2	3	2	6	10	8	2	2	2	1	38
Non-Pulmonary												
Males ..	1	—	5	1	2	—	—	—	—	—	—	9
Females ..	—	3	4	2	—	—	—	3	1	—	—	13
Totals	1	5	12	5	9	14	16	8	11	9	1	91

Other cases of tuberculosis were brought to the knowledge of the Medical Officer of Health otherwise than by formal notification, and the distribution of these by age, sex, type and source of information, is given in the subjoined table.

New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health otherwise than by formal notification.

Of the 8 cases, aged 1-15 years, returned as Pulmonary Tuberculosis, 1 in the age group 5-10 years was actually suffering from Hilar Adenitis.

### MORTALITY.

The number of deaths of City residents was 32, representing a death rate of 0.48 per 1,000 of the population. Thirty of the deaths were due to Pulmonary Tuberculosis giving a death rate of 0.45 per 1,000 for that form of the disease. These death rates are more in accordance with pre-War experience. A comparison of death rates for recent years is set out in the following table :—

**Table showing total Tuberculosis and Pulmonary Tuberculosis Death rate per 1,000 population of all ages from 1937-48.**

Year.	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948
Total Tub. Death Rate	0.6	0.5	0.5	0.7	0.69	0.7	0.6	0.8	0.68	0.77	0.74	0.48
Pulm.Tub. Death Rate	0.5	0.4	0.4	0.5	0.56	0.58	0.56	0.79	0.53	0.71	0.60	0.45

It will be noted that the total death rate has reached the level recorded in 1938 and 1939 for the first time since the war. One must be very guarded in interpreting this fall as in a community of only 65,580 persons the present fall may well be a chance variation.

Some cases were not notified till the time of or shortly before death. Of the total deaths for the year 28.7 per cent. occurred in either unnotified cases or within one week of the receipt of notification. In the following table is set out the period of survival after notification of patients who died during the year.

**Period of survival after notification, of persons dying during 1948:—**

	Pulmonary	Percentage	Non-Pulmonary	Percentage
Not notified ..	—	—	—	—
Died before notification .. ..	1	3.34	—	—
Died within 7 days ..	5	16.66	—	—
0—1 month ..	1	3.34	—	—
1—3 months ..	2	6.66	—	—
3—6 ..	—	—	1	50.00
6—9 ..	5	16.66	—	—
9—12 ..	1	3.34	—	—
1—2 years .. ..	6	20.00	1	50.00
2—3 .. ..	3	10.00	—	—
3 years and upwards ..	6	20.00	—	—
Total .. ..	30	100.0	2	100.0

**NEW CASES.**

There were in all 105 new cases of tuberculosis of all types discovered in the City throughout the year. New cases as distinct from notified cases, are those brought to the knowledge of the Medical Officer of Health by any means and in which the diagnosis has been confirmed. A comparison between new cases and deaths by age, sex and type of disease is given in the following table :—

**Age and sex distribution of new cases and deaths from tuberculosis, 1948.**

Age Periods	New Cases				Deaths			
	Pulmonary		Non-Pulm'ary		Pulmonary		Non-Pulm'ary	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	—	—	1	—	—	—	—	—
1—5	—	2	—	3	—	—	1	—
5—10	1	3	5	4	—	—	—	—
10—15	—	2	1	2	—	—	—	—
15—25	8	18	2	—	2	5	—	—
25—35	11	10	—	—	5	1	—	—
35—45	3	2	—	3	2	2	—	—
45—55	9	2	—	1	7	—	—	—
55—65	9	2	—	—	4	1	1	—
65 and upwards	—	1	—	—	—	1	—	—
Totals ..	41	42	9	13	20	10	2	—

It will be noted that the number of new cases has not fallen to the same extent as the death rate. In the following table are shown the number of Pulmonary, Non-Pulmonary and total new cases of Tuberculosis of both sexes and all ages and appropriate case rate per 1,000 of the population at all ages for the years 1937 to 1948.

**Table showing number of New Cases of tuberculosis by type with appropriate case rate per 1,000 population.**

Year	Mid Year Population	Pulmonary		Non-Pulmonary		Total	
		Cases	Rate per 1000 population	Cases	Rate per 1000 population	Cases	Rate per 1000 population
1937	59510	49	0.82	47	0.79	96	1.61
1938	60220	64	1.06	19	0.32	83	1.38
1939	62500	42	0.67	30	0.48	72	1.15
1940	65500	67	1.02	32	0.49	99	1.51
1941	66020	76	1.15	39	0.59	115	1.74
1942	64810	97	1.50	36	0.56	133	2.05
1943	62770	72	1.15	32	0.51	104	1.66
1944	60250	100	1.66	30	0.50	130	2.16
1945	59960	84	1.40	31	0.52	115	1.92
1946	63130	100	1.58	14	0.22	114	1.81
1947	63620	97	1.52	24	0.38	121	1.90
1948	65580	83	1.27	22	0.34	105	1.60

From this table it will be seen that during the War years there was an increase in total new cases and the total new case rate which reached its maximum in 1944. Since then there has been a tendency to fall. This increase has been accounted for by the increase in cases of Pulmonary Tuberculosis, there being a tendency for the number of Non-Pulmonary cases to diminish. The rate for Pulmonary cases rose again in 1946, and this was followed by a slight fall in 1947 and a moderate fall this year.

The increase in the number of cases has occurred in the age groups 15-35 years, and particularly in the 15-25 years group. This from the point of view of the community is a very serious matter as the affected young people are incapacitated or handicapped during what should be the most active period of their lives.

The control of what may be termed a chronic infectious disease is beset with difficulties not the least of which are the scarcity of Hospital and Sanatorium beds and the housing shortage. The Allocation of Houses Committee has given priority to applicants for Council houses where this was

necessary on account of tuberculosis, but only the known cases can be helped in this manner. In view of staffing difficulties and restrictions on capital expenditure one cannot expect much improvement in the Hospital and Sanatorium Bed situation for some considerable time.

### *DISPENSARY WORK.*

The Dispensary work was carried out, as in previous years, at the Clinic in George Street, while the Artificial Pneumothorax Clinic was conducted at the City General Hospital. The following sessions were held :

Adult Afternoon Clinic ..	..	..	Once weekly.
Adult Evening Clinic ..	..	..	Once monthly.
Children's Morning Clinic ..	..	..	Once fortnightly.
Contact Clinics (City General Hospital)			As required.
Pneumothorax Clinic do.		..	Once weekly.

Dr. Sargent, Medical Superintendent of Blencathra Sanatorium, continued to act as Clinical Tuberculosis Officer. From the appointed day he became an Officer of the Regional Hospital Board, and that body became responsible for the Dispensary so far as treatment was concerned, but the preventive aspects and home visiting remaining the responsibility of the City.

During the year 239 cases, excluding contacts, were examined at the Dispensary. Of these 96 were found to be definitely tuberculous, 73 being pulmonary and 23 non-pulmonary types of the disease.

The number of contacts examined was 139, as compared with 109 in the previous year, viz., 76 adults and 63 children; 3 adult and 4 child contacts were found to be suffering from pulmonary tuberculosis.

At the beginning of the year there were 306 pulmonary and 85 non-pulmonary cases on the Dispensary Register.

After the yearly review there remained 326 pulmonary and 95 non-pulmonary cases still on the register.

During the year 16 cases were written off the Dispensary Register as cured, 27 were transferred to other areas or lost sight of, and 27 cases died.

The Tuberculosis Visitors made 1,018 home visits during the year.

#### *ALLOWANCES.*

The Government Scheme of Allowances for cases of Pulmonary Tuberculosis ceased on the appointed day, and was replaced by a National Assistance Board Allowance. The Dispensary Staff co-operated with the National Assistance Officer in his dealing with claims from persons entitled to such an allowance.

#### *HOSPITAL TREATMENT.*

Under the Authority's Tuberculosis Scheme patients were admitted to the following hospitals :—

(1) *Blencathra Sanatorium, Threlkeld, Cumberland.*

Throughout the year 48 cases in all were dealt with. The average duration of residential treatment in respect of 29 patients discharged during the year was 197 days.

(2) *City General Hospital.*

During the year 47 cases were dealt with, and the average length of stay per patient was 73 days.

(3) *Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry.*

There were 2 cases in this Institution at the beginning of the year ; 7 were admitted and 8 discharged during the

**Return relating to all persons who were treated at the Treatment Centre at the Cumberland Infirmary during the year ended the 31st December, 1948**

	Syphilis			Soft Chancre			Gonorrhoea			Conditions other than Venereal			Totals		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals
1. Number of cases on 1st January under treatment or observation ..	90	101	—	—	35	12	8	1	133	114	247				
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection ..	6	8	—	—	7	5	—	—	13	13	26				
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from:—															
Syphilis, primary ..	10	2	—	—	—	—	—	—	—	—	10	2	12		
" secondary ..	1	2	—	—	—	—	—	—	—	—	1	2	3		
" latent in 1st year of infection ..	1	2	—	—	—	—	—	—	—	—	1	2	3		
" all later stages ..	12	12	—	—	—	—	—	—	—	—	12	12	24		
" congenital ..	8	5	2	—	—	—	—	—	—	—	8	5	13		
Soft Chancre ..	—	—	—	—	60	16	—	—	—	—	2	—	2		
Gonorrhoea, 1st year of infection ..	—	—	—	—	2	5	—	—	—	—	60	16	76		
" later ..	—	—	—	—	—	—	—	—	—	—	2	2	5		
Conditions other than venereal ..	—	—	—	—	—	—	—	—	—	—	129	85	214		
Conditions remaining undiagnosed at 31st December ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
4. Number of cases dealt with for the first time during the year under report known to have received treatment for the same infection or to have been under observation at other Centres ..	16	5	—	—	10	—	—	1	—	—	27	5	32		
Totals of items 1, 2, 3, 4.	144	137	2	—	114	38	138	86	398	261	659				
5. Number of cases discharged after completion of treatment and final tests of cure, or after diagnosis as non-venereal ..	22	24	—	—	29	15	127	84	178	123	301				
6. (a) Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from:—															
Syphilis, primary ..	6	1	—	—	—	—	—	—	—	—	6	1	7		
" secondary ..	3	1	—	—	—	—	—	—	—	—	3	1	4		
" latent in 1st year of infection ..	—	2	—	—	—	—	—	—	—	—	6	2	2		
" all later stages ..	6	7	—	—	—	—	—	—	—	—	7	1	13		
" congenital ..	—	1	—	—	—	—	—	—	—	—	1	1	1		
Soft Chancre ..	—	—	—	—	6	—	—	—	—	—	6	—	6		
Gonorrhoea, 1st year of infection ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
" later ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
6. (b) Number of Cases under treatment or observation which died:—															
From the Disease ..	2	—	—	—	—	—	—	—	—	—	2	—	2		
From Treatment ..	—	1	—	—	—	—	—	—	—	—	1	1	1		
From Other Causes ..	—	1	—	—	—	—	—	—	—	—	1	1	2		
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure ..	21	7	—	—	42	13	—	—	—	—	63	20	83		
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners ..	14	6	2	—	—	11	1	3	1	30	8	38			
9. Number of cases remaining under treatment or observation on 31st December ..	69	86	—	—	26	9	8	1	103	96	199				
Totals of items 5, 6, 7, 8, and 9	144	137	2	—	114	38	138	86	398	261	659				
10. Number of attendances:—															
(a) for individual attention of medical officers ..	1273	1331	2	—	313	112	227	144	1815	1587	3402				
(b) for intermediate treatment, e.g., irrigation, dressing ..	30	20	—	—	7	—	14	—	51	20	71				
Total Attendances ..	1303	1351	2	—	320	112	241	144	1866	1607	3473				



year, leaving 1 case in hospital, still under treatment at the end of the year. The average stay during the year was 128 days.

(4) *Infectious Diseases Hospital, Newtown, Carlisle.*

Twenty four cases were admitted during the year, 21 were discharged and at the end of the year, there were 3 cases in hospital under treatment. The average stay during the year was 41 days.

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### **VENEREAL DISEASES.**

During the year 126 persons residing in Carlisle were under treatment or observation for the first time at the Clinic at the Cumberland Infirmary, as compared with 148 in 1947.

22 patients were found to be suffering from syphilis, 34 from gonorrhoea, and 70 from non-Venereal or undiagnosed conditions. 1,846 attendances were made by these patients.

17 specimens of pathological material for Wassermann re-action were sent on behalf of general practitioners.

No action was taken under the Venereal Diseases Act 1917.

### **CLINICS.**

Clinics are held at the Cumberland Infirmary, Carlisle, on the following days :—

#### **MEN—**

Wednesdays, 2-30 p.m. and 6 p.m.

Thursdays, 6 p.m.

#### **WOMEN AND CHILDREN—**

Mondays, 2-30 p.m.

Wednesdays, 10 a.m.

Thursdays, 4-30 p.m.

**Return relating to all persons who were treated at the Treatment Centre at the Cumberland Infirmary  
during the year ended 31st December, 1948—cont.**

	Under 1 year		1 and under 5 years		5 and under 15 years		15 years and over		Totals	
			M.	F.	M.	F.	M.	F.	M.	F.
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
11. Number of cases of congenital syphilis in Item 3 above classified according to age periods ..	3	2	2	1	2	—	1	2	8	5
12. Pathological Work :—										
(a) No. of specimens examined at, and by the Medical Officer of the Treatment Centre ..	16		84	—	—	—	—	—	—	—
(b) No. of specimens from patients attending at the Treatment Centre sent for examination to an approved laboratory .. ..	2	187	10	1069	114	—	—	—	—	—

The following is the Report of the Clinical Officer (Dr. A. C. B. McMurtrie) :—

At the Cumberland Infirmary treatment centre the figures for 1948 show a marked decline in the incidence of venereal disease. This was forecast by the results of the previous year when the peak of the war-time epidemic had been passed.

The new early cases of Syphilis, that is, all patients attending for the first time within twelve months of infection, dropped from 45 in 1947, to 18 in 1948. In the same category the figure for Gonorrhoea dropped from 94 to 76.

It is interesting to note that the total number of new patients seen increased slightly from 347 in 1947, to 354 in 1948, due to the increasing number of people seeking advice and found not to have venereal disease. This is a sign that people are becoming more aware of the danger of venereal disease, and it may be attributed largely to the active propaganda carried out during the war in the Forces and among the civilian population.

#### *PATIENTS RESIDING IN CARLISLE.*

New cases of Syphilis in all stages of the disease residing in Carlisle were 22 compared with 31 in the previous year, and new cases of Gonorrhoea were 34 compared with 53.

Out of a total attendance at the Cumberland Infirmary of 3,473, 1,846 were by residents in Carlisle. These figures show a considerable reduction when compared with the previous year (3,764 and 2,052).

#### *NATIONAL HEALTH SERVICE.*

On 5th July, 1948, when the National Health Service Act came into operation, the administration of the Venereal Diseases Scheme passed from the Local Authority to the Regional Hospital Board. The staff of the treatment centres from that day were employed entirely by the Board, and the premises and equipment of the centres now belong to the Board,

From the patient's point of view, there is no change. As before, the clinics are open to anyone who wishes to attend free of charge, and the same days and hours of sessions have been adhered to.

The Medical Officer is due to retire under the age limit, and a new one has recently been appointed and is expected to take up his duties some time in June, 1949. The treatment centre at Dumfries will be conducted by him in addition to those at Carlisle and Whitehaven. The administrative area also includes North Westmorland with Appleby in it but not Kendal, Carlisle being the nearest treatment centre. Thus the duties of the Medical Officer will be considerably extended and obviously some assistance will be required.

#### *IN-PATIENT TREATMENT.*

One female bed is available in the Cumberland Infirmary, and two male beds at Fusehill Hospital. These have been occupied most of the time during the past year, but owing to the reduction in the number of new cases of Syphilis they were not in use all the time and were available for other patients in the intervals. Twenty-four patients were admitted to hospital during the year, and 180 in-patient days treatment were given. The majority were kept in for seven days.

#### *DRUGS.*

No very notable advance in treatment has been made during the past year. In the treatment of Gonorrhoea, Penicillin and Sulphathiazole are the drugs principally used, while for Syphilis all the old preparation of Arsenic and Bismuth hold the fort with Penicillin added. A new preparation of Penicillin has been introduced during the year, known as Procaine Penicillin. This has the advantage of being retained in the body longer than any other kind, and the makers claim twenty-four hours effective treatment from one injection. Thus it may prove useful for patients who can attend daily but are unable to come into hospital for their treatment. Unfortunately it is much more expensive.

## **SECTION IV.**

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### **Services provided under Part III of the National Health Service Act, 1946.**

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**HEALTH CENTRES.**

**CARE OF MOTHERS AND YOUNG CHILDREN.**

**MIDWIFERY SERVICES.**

**HEALTH VISITING.**

**HOME NURSING.**

**VACCINATION AND IMMUNISATION.**

**AMBULANCE SERVICE.**

**PREVENTION OF ILLNESS, CARE AND AFTER-CARE.**

**HOME HELP SERVICE.**

**MENTAL HEALTH SERVICES.**



## **Services provided under Part III of the National Health Service Act, 1946.**

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Most of the functions under this Act were undertaken prior to the 'Appointed Day,' and were included in previous Annual Reports of your Medical Officer of Health, but in this report the order and grouping is altered to conform with the proposals under the Act which have been approved by the Ministry of Health, and which have already been published

### **HEALTH CENTRES.**

Consultations have taken place with the Borough Engineer as Town Planning Officer, regarding the earmarking of suitable sites for Health Centres, but beyond this, no action has been taken. Carlisle has no housing estate at present under construction which is of sufficient size to justify the submission of plans for a Centre.

### **CARE OF MOTHERS AND YOUNG CHILDREN.**

In spite of many difficulties, particularly as to staffing, this service has been maintained and in some aspects the facilities have been increased. With the coming into operation of the National Health Service Act, the Specialist staff was transferred to the Regional Hospital Board, but the Clinics continued to be held and staffed as in the past with the exception of the Ante-natal sessions. The Ear, Nose and Throat, Ophthalmic and Orthopaedic Clinics were conducted primarily for the School Health Service, and have been dealt with in my Report on that subject. Pre-school children were seen and treated at these Clinics when necessary.

During the year 1,794 births were notified; 188 less than in 1947. Of these 1,731 were live-births, and 63 still-births. All notifications were by midwives. In 2 instances, a reminder of the statutory duty of notification was necessary.

### *ANTE-NATAL CLINICS.*

Ante-Natal Clinics were held at Eildon Lodge Maternity and Child Welfare Centre, and a Specialist consultative session by the Obstetrician (Dr. G. P. Milne), and Assistant Obstetrician (Dr. Josephine Davidson), was held weekly in George Street Maternity Home until November. By September it became obvious that more effective supervision of booked cases for hospitals could be carried out if the ante-natal examinations were undertaken on hospital premises rather than at Eildon Lodge, and Dr. Milne made a request for such an alteration. Furthermore, the number of Health Visitors was so reduced that it was impossible for them to staff the clinics, and this involved the hospital midwives and student midwives travelling to the clinics. In November therefore, after consultation with the Regional Hospital Board and Central Midwives' Board, the ante-natal clinics for the hospital and domiciliary midwifery services were separated. The hospital clinics were transferred to the City General Hospital, while the Domiciliary Clinics were conducted at Eildon Lodge by Dr. Anderson (Assistant Medical Officer of Health) and the domiciliary midwives. The hospital clinics provide a consultative service for the Area.

The number of patients who attended the Ante-natal Clinics for the first time during the year, was 1,074 and the number of attendances by expectant mothers was 6,627.

### *POST-NATAL CLINICS.*

A Post-Natal Clinic was held at the City Maternity Hospital by Dr. Davidson each week for hospital patients. Patients who were confined at home and who did not have the services of a General Practitioner Obstetrician were seen at one of the Ante-Natal sessions at Eildon Lodge. The number of patients attending did not justify a separate session.

The Voluntary Clinic, run under the auspices of the Family Planning Association, continued its activities during the year.

### PROVISION OF MATERNITY OUTFITS.

Maternity outfits were available free of charge to expectant mothers, but there was no demand for them. Requests for these will undoubtedly increase as their availability becomes better known.

### CARE OF PREMATURE BABIES.

These babies were kept under constant supervision by the Health Visitors from the time the notification was received. Where the baby was born at home and the conditions were good, the child was visited daily. On the other hand, if necessary on medical grounds, and if the home conditions were unsatisfactory, the child was admitted to a special nursery in the City Maternity Hospital.

The close liaison which has always existed between the Hospital staffs and the Health Visitors, continued, and when notification of the discharge of a child from Hospital was received, the Health Visitor followed up the case and arranged for the necessary nursing services to be provided at home.

The number of premature babies notified during the year was 57, 10 of these were born at home and 47 in hospitals or nursing homes. Of the 10 born at home, one was removed to the special nursery at the City Maternity Hospital.

The following table gives details of the premature babies

No. Notified	No still surviving at 31/12/48	Number who died within			
		One Week	Two Weeks	Three Weeks	Four Weeks
57	47	4	—	—	—

### CHILD WELFARE CLINICS.

On the 13th February, 1948, I reported to the Mothers, Children and Nursing Sub-Committee on the location of Infant Welfare Centres, and I stressed that to be effective such centres should be within pram pushing distance of the Home. It was decided that peripheral Maternity and Child Welfare Clinics should be opened when staff and premises

were available. Due to the lack of Health Visitors, coupled with the difficulty of obtaining premises, this Scheme could not be brought to fruition, but it was possible to establish a Clinic at the Community Centre in Currock on Tuesday afternoons, and this commenced on the 30th November, 1948. The Tuesday session at Eildon Lodge was discontinued from that date.

The following table gives details regarding children who attended the Clinics :—

No. of children who attended Centres during the year 1,711

No. of children who first attended, and on the date of their first attendance were :—

Under one year of age	..	..	696
Over one year of age	..	..	164
Total	..	..	860

No. of children who attended the Centres and at the end of the year were :—

Under one year of age	..	..	548
Over one year of age	..	..	1163

Total number of attendances made by children who attended the Centres 9,476

The following is a summary of children referred for dental and specialist treatment :—

*To Ophthalmic Surgeon.*

Number of children	..	..	30
--------------------	----	----	----

*To E. N. T. Specialist.*

Number of children examined	..	152
Number of children re-examined	..	110
Number of children admitted to hospital for operative treatment	..	94

*To Orthopaedic Surgeon.*

Number of new cases examined	..	78
Number of cases re-examined	..	203

*To Dental Officer.*

Number of children examined ..	87
Number of children who received treatment .. .. ..	75

### *SUPPLY OF WELFARE FOODS.*

Welfare foods continue to be supplied at Eildon Lodge Clinic, the Clerk on duty distributing Orange Juice, and Cod Liver Oil on behalf of the Ministry of Food.

National Dried Milk and Vitamin products were supplied at the Food Office in Fisher Street, and an assistant of that office attended the Infant Welfare Clinic at Currock for the distribution of such products. In addition the Food Office had subsidiary Centres for distribution as follows :—

Harraby Community Hut—each Thursday—2-30—4-30 p.m.

Raffles Community Centre—each Tuesday, 2-30—4-30 p.m.

### *PRIORITY DENTAL SERVICES FOR EXPECTANT AND NURSING MOTHERS AND PRE-SCHOOL CHILDREN.*

REPORT BY DR. T. W. GREGORY, SENIOR DENTAL SURGEON.

Joint use with the Education Committee of the resources of the School Dental Service has been secured to carry out the duty of the Authority to make special arrangements for the above classes, and the statistical table appended gives the figures for the year as requested by the Ministry.

With a staff of 1 $\frac{2}{3}$  dentists to carry out work requiring probably five dentists for both Committees, it was not deemed advisable to press for the examination by one of the staff of every expectant mother following her first attendance at the ante-natal clinic, but such cases as were referred, and reported to the dental service, received attention.

As recorded to the Education Committee, a survey of the incidence of dental caries in 500 children aged five years was carried out during the year. There was found to be an average of four to five decayed teeth per child inspected. This is an indication of the magnitude of the need for treatment of pre-school children.

Some difficulty was experienced in getting expectant mothers to keep their appointments and in persuading them to receive complete treatment. This, I understand, is a not uncommon experience in other areas. A sympathetic approach and broad view is obviously called for, and a few words on the harm that oral disease can cause to both mother and child sometimes converts the hesitant. Unfortunately we have not got accurate figures for the mothers and pre-school children made dentally fit. The numbers given (Table 1) are probably too high, and indicate rather those who received all the treatment which was deemed essential at the time and in the present circumstances.

The second Table appended gives the actual amount of work done since the appointed day.

Dental treatment should rightly be concentrated first on mothers and children, and it cannot be urged too strongly that unless the facilities are expanded in the coming year the cost to the community in terms of money and health will mount increasingly.

**Table I.**

(l) *Expectant Mothers.*

(a) Examined .. .. ..	82
(b) Needing treatment .. .. ..	81
(c) Treated .. .. ..	64
(d) Made dentally fit .. .. ..	47
(e) No. of teeth filled .. .. ..	49
(f) No. of teeth extracted .. .. ..	166
(g) Other operations .. .. ..	15
(h) Prosthetic treatment .. .. ..	1 Partial Denture.

(2) *Nursing Mothers.*

(a) Examined .. .. ..	2
(b) Needing treatment .. .. ..	2
(c) Treated .. .. ..	1
(d) Made dentally fit .. .. ..	1
(e) No. of teeth filled .. .. ..	—
(f) No. of teeth extracted .. .. ..	11
(g) Other operations .. .. ..	—
(h) Prosthetic treatment .. .. ..	1 Full Upper & Lower Denture.

(3) *Pre-School Children.*

(a) Examined .. .. ..	82
(b) Needing Treatment .. .. ..	77
(c) Treated .. .. ..	75
(d) Made dentally fit .. .. ..	71
(e) No. of Teeth filled .. .. ..	89
(f) No. of Teeth extracted .. .. ..	111
(g) Other operations .. .. ..	3

**Table II.**

Treatment provided from 5th July, 1948, to 31st December, 1948.

(1) *Expectant Mothers.*

(a) Examined .. .. ..	21
(b) Needing Treatment .. .. ..	21
(c) Treated .. .. ..	20
(d) Made dentally fit .. .. ..	12
(e) No. of teeth filled .. .. ..	19
(f) No. of teeth extracted .. .. ..	61
(g) Other operations .. .. ..	10
(h) Prosthetic treatment .. .. ..	1 Partial Denture.

(2) *Nursing Mothers*—None examined as such for the first time after 5th July, but 4 Expectant Mothers continued treatment as Nursing Mothers.

## MIDWIFERY SERVICES.

### *DOMICILIARY MIDWIFERY.*

In accordance with the Midwives Act, 1936, and the scheme under Section 23, of the National Health Service Act, 1946, you employed directly three midwives and the Carlisle District Nursing Association provided three midwives on your behalf. Two of the directly appointed midwives lived in and practised from their own homes. The three District Nursing Association midwives and the remaining Council midwife resided in and practised from the house at 16 Portland Square, leased for this purpose. The Corporation is at present negotiating for the purchase of this property as the lease expires in 1949.

The six midwives have all had training in the administration of gas and air and each has been supplied with a Minnitt Apparatus. This apparatus is serviced at regular intervals under contract.

Ante-natal Clinics were held at Eildon Lodge as already reported (page 52).

The Council accepted all midwives as essential car users and all are entitled to receive an interim car allowance of £80 per annum pending the adoption of a permanent scale for Council employees. The Council also paid a grant to the District Nursing Association for the use of its cars for the purposes of the domiciliary midwifery scheme. Any Municipal or District Nursing Association midwife who was without a car, and could not get one of the District Nursing Association cars was entitled to Ambulance transport.

During the year the domiciliary midwives attended 281 women in childbirth, 208 as midwives, and 73 as maternity nurses. In 92 instances the midwife summoned medical aid under Section 14 (1) of the Midwives Act, 1918.

### *SUPERVISION OF MIDWIVES.*

The Superintendent and Assistant Superintendent of the District Nursing Association have acted as Lay Supervisor

and Assistant Supervisor of Midwives, while Dr. Christine Anderson (Assistant Medical Officer of Health) has undertaken the duties of Supervisor of Midwives.

The following is a summary of the numbers of midwives who notified their intention to practise in the City.

*In Domiciliary Practise.*

No. who notified intention to practise as Midwives	9
No. „ „ „ „ Maternity Nurses	9

*In Nursing Homes.*

No. who notified intention to practise as Midwives	5
No. „ „ „ „ Maternity Nurses	7

*In Hospitals.*

No. who notified intention to practise as Midwives	30
No. „ „ „ „ Maternity Nurses	7

**MIDWIFERY TRAINING.**

In March, 1948, the District Nursing Association commenced activities as a Part II Training school for Midwives. Four students can be taken at one time, but the falling birth rate, coupled with the increasing demand for hospital confinement made it impracticable to accept more than three students at one time. The Assistant Superintendent acted as Sister Tutor, and Dr. Anderson gave some of the Lectures.

**GENERAL PRACTITIONER OBSTETRICIANS.**

At the end of the year 18 local practitioners were on the list of General Practitioner Obstetricians of the Carlisle Executive Council. It was open to an expectant mother to engage any practitioner of her choice to attend her before, during, and after her confinement or she could engage a midwife. In the former case she also engaged a midwife who acted as Midwife or Maternity Nurse according to circumstances.

**HEALTH VISITING.**

This year saw provision for great expansion of the Health Visiting service by many authorities. The training of Health

Visitors during the War years had not been on a sufficient scale to meet this increased demand and therefore many Local Authorities were unable to fill their new establishments or even replace Health Visitors who had left. The difficulty of procuring private accommodation and the high cost makes it quite uneconomic for a young woman to seek a position as a Health Visitor in any place other than her home town or County.

During the year the City lost the services of 6 Health Visitors, 2 of whom were offered positions by the Local Authority in whose area their homes were situated. Carlisle is unfortunate in that very few local girls have trained as Health Visitors and all the staff has generally to be recruited from a distance. Few people whose homes are as far south as Liverpool or Manchester are willing to come as far as Carlisle when there are abundant vacancies nearer home.

At one stage instead of an establishment of 13 the City had one Senior Health Visitor, one Health Visitor and a Senior Nurse in charge of the School Clinic. It was manifestly impossible to cover the work adequately and the Senior Health Visitor was given a temporary car allowance at the rate of £50 per annum for the use of her own car. This enabled her to undertake more home visits, but it reduced that friendly contact which is achieved when the Visitor walks from house to house and has the opportunity of meeting mothers and children informally.

In June when it was seen that there was going to be difficulty in recruiting Health Visitors you recommended the Finance Committee to provide flats for Health Visitors, increased uniform allowances from £12 to £20 per annum and established scholarships for training Health Visitors who would work in Carlisle for a specified period after qualification. As a result two student health visitors were engaged at the end of the year, and arrangements for their training in Aberdeen were made. By the end of the year, however, no progress had been made in the acquisition of suitable property for conversion into flats, the price obtaining in the City for

such property being higher than that allowed by the District Valuer.

We obtained the assistance of experienced nurses who did not possess the Health Visitors certificate and re-arranged the duties and districts of the remaining Health Visitors. In spite of all the difficulties the essential work was carried out but naturally the scope and thoroughness did not come up to that which the National Health Service Act aimed at establishing and for which your proposals provided.

The Children's Act transferred, as from 5th July, 1948, the functions under the Child Life Protection Provisions of the Public Health Act, 1936, from the Health Visitors to the Children's Officer. The total number of annual visits on this account not being large, this transfer did not materially relieve the work to be done, though it certainly removed a certain amount of responsibility.

The following is a summary of the work done by the Health Visitors during the year :—

Primary visits in connection with the notification of births..	..	..	..	1446
Re-visits to children between				
0-1 year	..	..	..	5343
1-5 years	..	..	..	5838
Total number of routine visits to children				12627
Visits to children nursed or maintained by persons other than the parents	..			48
Visits to expectant mothers :—				
Primary	..	..	..	200
Re-visits	..	..	..	62
Visits in connection with :—				
Deaths of children under 1 year	..			43
Ophthalmia Neonatorum	..	..		11
Pneumonia	..	..	..	19
Measles :—				
Under 5 years	..	..	..	249
Over 5 years	..	..	..	96
				345

## Whooping Cough :—

Under 5 years	..	..	..	99	
Over 5 years	..	..	..	21	120
Chickenpox	..	..	..	..	6
Mumps	..	..	..	..	—
Pemphigus Neonatorum	..	..	..	..	1
Visits to child Welfare Centre	..	..	..		271
Visits to Nurseries	..	..	..		17
Attendances at Ante-Natal Clinics	..	..	..		105
Attendances at Immunisation Clinics	..	..	..		18
Visits to special V.D. cases at request of Almoner at V.D. Department, Cumberland Infirmary					4
Visits to homes in connection with housing problems					20
Visits to homes in respect of prevention of illness, etc.					4

**HOME NURSING.**

Home Nursing was not previously undertaken by the City Council, but by the Carlisle District Nursing Association. This body with an altered constitution has carried on the work on behalf of the Corporation since the appointed day. The Association has had difficulty in getting nurses and some of the work is undertaken by part-time staff. Four full-time and five part-time, equivalent to a total of six full-time nurses were employed throughout the year. Practitioners wishing the service of a nurse for a patient have made their requests to the Superintendent of the District Nursing Association which has always been the practise.

The following is a summary of the work undertaken :—

	During whole year	After 5th July, 1948.
Number of cases attended	..	1526
Number of visits paid	..	763
		25122
		12819

**VACCINATION AND IMMUNISATION.****VACCINATION.**

As a result of the National Health Service Act, 1946, compulsory vaccination ceased to exist. The protection of

individuals against Smallpox is now, like other forms of protection such as Diphtheria Immunisation, entirely voluntary. In view, however, of recent importations of Smallpox it is essential that parents should see to it that children are vaccinated in infancy. Vaccination was carried out free, either by private practitioner or at a Clinic according to choice.

In accordance with the Proposals all practitioners in the City were approached and 20 indicated their willingness to take part in the scheme. All have been supplied with record cards and requisitions for the supply of fresh lymph which is obtained from the Pathologist at the Cumberland Infirmary. Where desired, vaccination was carried out at the School Clinic in George Street by an Assistant Medical Officer.

The following is a summary of the work done throughout the year :—

*By Public Vaccinator*

from 1st January—4th July.	.	.	.	.	.
Primary Vaccinations	..	..	..	369	.
Re-vaccinations	..	..	..	3	

*By Private Practitioners*

from 5th July, 1948.	.	.	.	.	.
Primary vaccinations	..	..	..	113	(approx.)
Re-vaccinations	..	..	..	17	(approx.)

*At School Clinic*

from 5th July, 1948.	.	.	.	.	.
Primary Vaccinations	..	..	..	93	
Re-vaccinations	..	..	..	—	
			Total Primary	575	
			Total Re-vaccinations	20	

*DIPHTHERIA IMMUNISATION.*

The scheme for Diphtheria Immunisation was operated in a similar manner, 22 local practitioners indicating that they wished to take part.

They were supplied with record cards and Diphtheria Prophylactic was available on demand at the Health Depart-

ment. - The Immunisation sessions at the School Clinic and at the Maternity and Child Welfare Clinic were continued throughout the year. A large number of children entering school had already been immunised and the parents of these children were advised to allow them to have a re-inforcing dose to keep the immunity at a high level.

The following is a summary of work done. :—

<i>By private practitioners</i> (approx. figures.)	<i>Under 5 years.</i>	<i>Five years and over.</i>
Complete Course .. ..	43	—
Partial Course (Patient failed complete) .. ..	—	—
Re-inforcing dose .. ..	—	8

#### *At Clinics.*

Complete Course .. ..	1042	101
Partial Course .. ..	45	9
Re-inforcing Dose .. ..	—	930

61.6 per cent. of children under 5 years and 86.6 per cent. of children of school age in the Town had been immunised. This is a gratifying increase but there is still room for improvement.

It is regrettable that the fees payable to General Practitioners for Vaccination and Immunisation have not been negotiated. The City Council is responsible for the payment of the practitioners in retrospect as soon as an appropriate fee is determined.

## **AMBULANCE SERVICE.**

The proposals of the Council under Section 27 of the National Health Service Act provided for an amalgamation with the Fire Brigade, but on account of certain difficulties the actual amalgamation was not effected by 31st December, 1948, and I shall therefore deal with the Service throughout the period as in previous reports.

Lack of transport was the main trouble throughout the year. The two converted A.R.P. ambulances were certified

to be unroadworthy and had to be relegated to the scrap heap. A converted Humber from Preston which was transferred to the City by the Ministry of Health suffered a similar fate and we were left with two old ambulances—one out of commission because of a defect in transmission—and a 10 H.P. car. All attempts to get early delivery of the two ambulances ordered in February, 1947 failed, and we were given to understand that the order might not even be completed. At this time you placed orders for two Austin Sixteen Saloons. The question of a shooting brake type was considered but delivery dates precluded this proposition. You also placed an order for two Bedford Ambulances with Lomas bodies for delivery at the very earliest possible date, and a further two for later delivery.

The two Austin Sixteen Saloons were delivered prior to the appointed day, but as there was only one regular ambulance in commission you authorised me to hire one from a local firm and this vehicle was in commission until the 31st December, 1948.

Before the end of the year we were notified that the order placed in 1947 would be executed, and at the time of writing the City Ambulance Service has four new ambulances in the fleet.

From the appointed day we had, in addition to our own ambulance Service, the Hospital Car Service, a voluntary organisation run by the British Red Cross Society in association with W.V.S. and St. John Ambulance Brigade Car Pools. The City contributed at the rate of £52 10s. per annum for Office and Administrative expenses and the drivers received 6d. per running mile plus subsistence allowance if called upon to undertake long journeys.

On the 5th July the Ambulance Service became a free Service, and the scope was greatly extended. The City no longer catered for the adjacent area of Cumberland County which work was undertaken by the agents of the County Council. The needs of patients receiving outpatient treatment in hospitals was shared between the Hospital Car Service and the Ambulance Service, but the remainder of the work was

undertaken by the Ambulance Service. Carlisle being a hospital centre the removal of patients from hospital to their homes in distant, and often inaccessible, parts placed a great strain on the Ambulance personnel who were called upon to work a considerable amount of overtime. Not only was this expensive but it was extremely fatiguing for the drivers.

As the months went by the demands on the Ambulance Service increased. Free ambulance provision is a very highly desirable thing, but it is known that there are abuses of the Service though the eradication of these, without hardship to the innocent, is by no means easy.

The following table shows the amount of work done before and after the appointed day :—

	1st January—4th July, Journeys. Mileage.		5th July—31st Dec. Journeys. Mileage.	
City Removals to Local Hospitals .. ..	848	4547	..	951 5299
Removals from Hospitals, etc., to City .. ..	71	318	..	298 1465
City Removals to distant locations .. ..	47	6836	..	30 3520
County Removals to Local Hospitals .. ..	129	2377	..	22 500
Removals from Hospitals to Other Areas ..	33	1598	..	481 28213
Hospital Transfers :				
(a) City Patients ..	72	371	..	118 483
(b) Non-City Patients ..	51	232	..	53 199
Other Journeys .. ..	643	2647	..	582 3143
<b>TOTALS</b>	<b>1894</b>	<b>18926</b>	..	<b>2535 42822</b>

### **PREVENTION OF ILLNESS, CARE & AFTER CARE.**

Some of the requirements under Section 28 of the National Health Service Act, 1946, are new, others are merely the development of work already undertaken by the Local Health Authorities. Lack of staff prevented expansion on any large scale but every endeavour was made to meet demands.

### **TUBERCULOSIS.**

Visiting was undertaken by the Health Visitors but when their number became depleted the Ministry's approval was

obtained to employ 4 State Registered Nurses on this work.

The details of notification of cases of Tuberculosis are given on page 37.

Tuberculosis visitors paid 1018 home visits during the year, and 139 contacts were examined by the Clinical Tuberculosis Officer. Of these 7 were found to be suffering from Pulmonary Tuberculosis.

On 5th July the Government Allowance Scheme for cases of Pulmonary Tuberculosis was replaced by grants from the National Assistance Board, and the Local Authority was not thereafter responsible for the payments. During the year 31 City patients received allowances under one or both of these systems of payment.

#### *MENTAL ILLNESS AND DEFECTIVENESS.*

The work under this Section is described on pages 70-72.

#### *OTHER TYPES OF ILLNESS.*

The Health Visitors co-operated with Hospital Staffs and General Practitioners and other appropriate individuals in dealing with persons who required their services, but the amount of work undertaken was necessarily limited. The District Nursing Association made provision for after care and treatment when so requested by the Practitioner in charge.

The follow up of V.D. cases in the City has in the past been undertaken by Miss Buck, Almoner of the Cumberland Infirmary. Close liaison was maintained between her and the Health Visitors who gave assistance with cases of special difficulty.

#### *PROVISION OF NURSING EQUIPMENT AND APPARATUS.*

The demand for nursing requisites was not as great as had been expected. The articles were stored at the Health Department and were issued on the production of a note from a Doctor, Nurse or Midwife. A small loan charge varying with the value of the article was made.

Such requisites were also held by the District Nursing Association but their supply was conserved for emergency issue only.

The number of articles on loan from the Department up to 31st December, 1948, was 20.

### **HOME HELP SERVICE.**

On the 1st July, 1948, the Home Help Organiser took up her duties in Carlisle. She attended the Course for Home Help Organisers run by the W.V.S. at Leatherhead and on returning applied herself to the Organisation of the Service. This included making all arrangements for publicity, enrolment of Home Helps, assessment of householders and involved consultations with the Treasurer's staff, Officers of the Ministry of Labour, and National Assistance Board as well as Voluntary Organisations, particularly the W.V.S.

The Service was launched at a Public Meeting held in the Town Hall on the 20th October, 1948. His Worship the Mayor, Alderman Miss Welsh, occupied the Chair, and the principal speaker was Mrs. Macdonald, Home Help Specialist of the W.V.S. The press was extremely co-operative in publicising the scheme.

As a result of the efforts a very large number of women applied for posts as Home Helps. To begin with the number of people willing to enrol was much greater than the demand, and your Organiser was in the difficult position of not being able at the time to engage suitable candidates because of lack of demand for their services.

By the end of the year 3 full-time and 8 part-time Home Helps were employed by the Council, and had given service to 15 householders.

The service is still in its infancy and it will be some time before the benefits of the scheme will be fully realised.

### **MENTAL HEALTH SERVICES.**

Mental Deficiency work prior to the appointed day was undertaken by the Cumberland, Westmorland and Carlisle Joint Committee for the Mentally Defective, and the functions

under the Lunacy and Mental Treatment Acts were carried out by the Social Welfare Committee and its Officers. The following observations therefore refer to the period 5th July to 31st December, 1948.

Mental Health Sub-Committee, consisting of eight Councillors, one with special experience in Mental Deficiency and three co-opted members, one a doctor, with special experience in mental illness, meets when convened. (In any case it meets at least once a quarter.)

By resolution the Council delegated to this Sub-Committee power to deal with cases under the Mental Deficiency Acts.

The general direction of the Service was in the hands of the Medical Officer of Health, who was assisted by : -

One Psychiatrist (Mental Illness) M.B., Ch.B., D.P.M. Part-time.	From Regional Hospital Board
One Psychiatrist (Mental Deficiency) L.R.C.P.E., etc., Part-time.	
One Psychiatric Social Worker, Part-time.	
One Assistant Medical Officer of Health, M.B., Ch.B., D.P.H.	
One Mental Health Worker—M.A., Social Science Diploma—from Voluntary Association. This Officer also acted as Duly Authorised Officer.	
Three selected men from Ambulance Service who after a special course were appointed Duly Authorised Officers.	

As indicated above the Psychiatrists and Psychiatric Social Worker are Regional Hospital Board personnel. Close liaison existed between the staffs and the follow up of patients on licence was undertaken by the Council's Agents.

The Cumberland and Carlisle Voluntary Association for Mental Welfare undertook the Mental Health Visiting in the area. The work of the Association was under the general direction of the Organising Secretary, but the actual visiting of City patients was largely undertaken by one Worker.

Mental Health Workers in training from various centres receive practical instruction from the Voluntary Association, but the City Council has not initiated such training.

## MENTAL ILLNESS.

During the period under review the duly authorised officers dealt with 24 patients as shown below :—

(1) No. considered unsuitable for admission to a Mental Hospital .....	..	..	..	..	..	..	..	3
(2) No. who consented to go as Voluntary patients ..	..	..	..	..	..	..	..	10
(3) No. who were admitted on a three day Order ..	..	..	..	..	..	..	..	2
(4) No. who were admitted on Urgency Orders ..	..	..	..	..	..	..	..	2
(5) No. dealt with by Summary Reception Orders (including 3 and 4 above) .....	..	..	..	..	..	..	..	9
(6) No. who were admitted by Petition ..	..	..	..	..	..	..	..	2

## MENTAL DEFICIENCY.

Between 5th July and 31st December, 1948, 9 persons were ascertained as subject to be dealt with under the Mental Deficiency Acts. These were dealt with as follows :—

Referred for institution treatment ..	6
Placed under guardianship ..	2
Placed under Statutory supervision ..	1

At the end of the year 9 patients were awaiting institutional treatment.

The following are details of those under Guardianship and Statutory supervision :—

		<i>Guardianship.</i>		<i>Statutory Supervision.</i>
On list at 5th July, 1948	..	11	..	35
Removed during period	..	1	..	2
Died	..	—	..	—
Added during period	..	—	..	3
On list at 31st December, 1948		10	..	36

The Mental Health Workers paid 189 visits during the period and 6 reports on patients on licence were made on behalf of Hospital Authorities.

There is no Occupation or Training Centre. A Home Teacher on the staff of the Workshops for the Blind visited and gave instruction to one suitable sighted mentally defective person.

## **SECTION V.**

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**General Provision of Health Services Etc.**



## General Provision of Health Services, Etc.

On the 5th July all the Hospitals in the City and those outside which served the City vested in the Minister of Health. On the same day the Children's Department came into being, and the Social Welfare Department was replaced by the National Assistance Board and the Welfare Services Committee

### HOSPITALS.

The hospitals used by the inhabitants of the area were :—

*General Hospitals.*

Cumberland Infirmary.  
City General Hospital.

*Maternity Hospitals.*

City Maternity Hospital.  
City Maternity Home.

*Infectious Diseases Hospital.*

City Infectious Diseases Hospital.

*Tuberculosis.*

Blencathra Sanatorium, Threlkeld  
Pavilions, Fusehill Hospital.

*Mental Hospitals.*

Garlands Mental Hospital (Mental Illness)  
Dovenby Hall Hospital (Mentally Defectives)

*Other Hospitals for the Sick and Convalescent.*

Border Counties Home for Incurables, Strathclyde House.  
Cumberland & Westmorland Convalescent Institution, Silloth.

In special circumstances patients are taken to Hospitals in Newcastle, Edinburgh or Glasgow for treatment.

The hospitals which had belonged to the City were managed on an agency basis until the end of the year. The details relating to the Infectious Diseases Hospital are given in Section 3 and particulars relating to other hospitals now follow :—

*Maternity Home, George Street.*

Number of Maternity beds available for use on 31st December, 1948 .. .. ..	15
Number of maternity cases admitted during the year .. .. .. .. ..	270
Average duration of stay .. .. .. ..	10 days

Number of infants who at any time received a supplementary or complementary feed while in the Hospital	..	..	22
Number of infants discharged during the year who were wholly breast fed	..	..	165
Number of maternal deaths during the year	..		Nil.
Number of deaths of infants born in the Hospital who died there within 28 days of birth	..		2
Number of patients in Hospital on the 31st December, 1948	..	..	8
Number discharged or died during the year	..		272
Number of births during the year—live	..		221
	still	..	5
Out-patients :			
Number of new patients during the year	..		139
Total attendances	..	..	216

*Maternity Hospital, Finschill Street.*

Number of maternity beds available for use on 31st December, 1948	..	..	..	56
Number of maternity cases admitted during the year	..	..	..	1302
Average duration of stay	..	..	..	11.56 days
Number of infants who at any time received a supplementary or complementary feed while in the hospital	..	..	..	137
Number of infants discharged during the year who were wholly breast fed	..	..	..	823
Number of maternal deaths during the year	..	..	..	3
Number of deaths of infants born in hospital who died there within 28 days of birth	..	..	..	27
Number of patients in Hospital on the 31st December, 1948	..	..	..	41
Number discharged or died during the year	..	..	..	1292
Number of births during the year — Live	..	..	..	953
	still	..	..	50
Out-patients :				
Number of new patients during the year	..	..	..	885
Total attendances	..	..	..	5168

In the latter part of the year this hospital had an outbreak of Dysentery due to *Salmonella typhi murium* among infants. This outbreak is dealt with on page 33).

*City General Hospital, Fuseli Street.*

Total bed complement including Tuberculosis Pavilions .....	160
Number of patients in Hospital on 31st December, 1948 .....	72
Number discharged or died during the year ..	2299
Average length of stay in days ..	14.797

### Out-patients :

Number of new patients during the year . . . . . 710  
 Total Attendances . . . . . 3042

## **CARLISLE DISPENSARY.**

This Institution carried on until the 4th July, 1948, as it had done in previous years. It no longer functions, but the Doctor in charge now serves as a General Practitioner on the list of the Carlisle Executive Council and the patients have therefore had continuous service.

## **PUBLIC HEALTH LABORATORY SERVICE**

The work was carried out at the Laboratory of the Cumberland Infirmary under the direction of Dr. J. Steven Faulds, and close liaison is maintained with the Laboratory especially in the investigation and control of epidemic disease.

## **PUBLIC ANALYST SERVICE.**

Cyril J. H. Stock, Esq., B.Sc., F.I.C., etc, of Darlington, is Public Analyst to the Council, and samples of water, foods, etc., were examined at his laboratory.

## **REGISTRATION OF NURSING HOMES.**

There were no new Registrations during the year. The number of Homes on the Register at the end of the year was six. They were periodically inspected and conditions generally were found to be satisfactory.

## **THE CHILDREN'S ACT, 1948.**

The coming into force of this Act caused the establishment of a new Department, the Children's Department, and the appointment of a Children's Officer. One of the Health Visitors was appointed Children's Officer. While this caused embarrassment in the Health Department on account of staff difficulties it ensured a close liaison between the departments from the beginning.

The Children's Home at Aglionby Grange was transferred from the Social Welfare Committee to the Children's Committee. Certain duties under the Child Life Protection provisions of the Public Health Act, 1936, were taken from the Health Visitors and placed with the Children's Officer.

From the beginning the Medical Officer of Health has acted as Medical Adviser to the Children's Committee and given assistance as regards control of infectious diseases, etc. in the Children's Home.

#### **NATIONAL ASSISTANCE ACT, 1948.**

The Medical Officer of Health is Chief Officer to the Welfare Services Committee and is assisted by a part-time Administrative Officer (Mr. Davidson.)

## **SECTION VI.**

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### **Report of the Chief Sanitary Inspector**

**WALTER HANSON, M.S.I.A., C.R.S.I.**



REPORT  
OF THE  
CHIEF SANITARY INSPECTOR  
WALTER HANSON, M.S.I.A., C.R.S.I.

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I submit a report upon the work of the Sanitary Inspectors during the year 1948.

**SANITARY CIRCUMSTANCES.**

Systematic inspections were maintained by the Inspectorial Staff during the year, advice given and much information imparted not conveniently recorded by figures.

In Appendix 1 however the classified inspections are detailed.

**FOOD SUPPLIES.**

**SLAUGHTERHOUSES.**

The Ministry of Food continued to exercise control of the slaughtering, dressing and disposal of meat, with the Corporation maintaining the management and conduct of the premises, and the inspection of meat. In March the Manager-Meat Inspector, Mr. A. R. Mitchell, left to take up a similar appointment at Paisley, Mr. J. S. Murray, former assistant, being appointed Manager in his stead. This necessitated providing the staff from this Department for meat inspection work, formerly performed by Mr. Mitchell, and the time of one qualified Inspector has been almost wholly employed for this purpose.

Certain accumulated repairs were scheduled for completion in the financial year 1949-50.

Particulars of animals slaughtered, analyses, and weights of meat declared to be unfit for food appear in the appendix,

### OTHER FOOD PREMISES.

Much attention was paid to the examination of unfit foods at grocers, warehouses, etc., and 417 certificates were issued, culminating in the total shown as 'Other Sources' in Table on page 94).

Kitchen staffs and food handlers were constantly reminded of the necessity for personal hygiene and the importance of cleanliness of utensils, etc. Lectures were given by the Chief and Assistant Inspectors to the Townswomen's Guild and others, and two Inspectors also attended special courses organised by the Central Council for Health Education.

The emergency milk scheme continued to operate with two retailers only.

### FOOD AND DRUGS ACT, 1938.

The number of samples submitted to the Public Analyst was 97, representative of various foodstuffs. With the exception of milk the samples were purchased informally.

Adverse reports were received concerning one sample of milk which was slightly deficient in one respect, i.e., non-fatty solids, but two subsequent samples from the same source were genuine.

Of the 17 samples of milk an average composition was as follows :—

Fat—3.376%	Non-Fatty Solids 8.742%
------------	-------------------------

One sample of ice-cream powder was returned as infested with mites, and the whole was, at our request, surrendered as unfit for food.

A sample of wine essence was declared to be deficient in volume : a matter which was reported to the Weights and Measures Department.

Particulars, etc., of samples are given in appendix II, page 91,

## ATMOSPHERIC POLLUTION.

The number of factory chimneys active in the City is 40 and observance of smoke or grit emissions was made on 40 occasions. In 8 instances the attention of the management of the factory or Railway Executive was directed to emissions contrary to law.

## RODENT CONTROL.

Action as prescribed by the Ministry of Food was continued in accordance with Direction. Comprehensive treatment of sewers was undertaken, as well as the baiting of refuse tips (active and inactive), commercial and private premises. Our treatment of the public sewers twice yearly has produced a marked reduction in the number of complaints of rats on premises.

Number of complaints of Rats	..	..	75
Number of notices served on owner or occupiers			13

	No. of Pre- baits laid	No. of Poison baits laid
Refuse tips and open spaces	946	427
Buildings and yards	289	117
Sewers	1580	410

## REFUSE REMOVAL.

The frequency of refuse removal was twice or thrice weekly according to district, with one day set apart mainly for salvage collection. The Department has its own stables and garage, accommodating 13 horses (4 loaned to City Surveyor), 10 S.D. Freighters and one Austin 14 h.p. lorry. A small destructor, for the accommodation of trade and putrefying refuse only, is maintained at Bousteads Grassing. House refuse was tipped at four points of disposal. Land for tipping purposes is becoming severely restricted, and the need for a refuse destructor is imminent. Street cleansing is undertaken by the staff of the City Surveyor.

A summary of articles collected under the City's Salvage scheme appears in subjoined Table.

	WEIGHT.				VALUE		
	T.	Cwt.	Qtrs.	Lbs.	£	18	3
Paper	474	11	1	—	3013	18	1
Iron	81	6	2	—	141	11	3
Tin	54	19	—	—	98	4	8
Other Metals	7	15	—	14	340	16	3
Textiles	4	1	—	20	46	9	7
Bottles	1	10	2	9	17	6	10
Bones	3	5	1	14	18	0	1
Kitchen Waste	1	13	2	—	1	13	6
Manure	147	13	2	—	37	18	0
					£3715	18	3

### OFFENSIVE TRADES.

The number of trades under this heading is 4 i.e., 1 fellmonger, 1 tripe boiler, 1 rag and bone dealer, and 1 gut scraper.

### APPENDIX I.

#### SERVICE OF NOTICES.

Number of notices served during the year ..	..	496
Number outstanding at the end of 1947 ..	..	342
Notices complied with during the year 1948 ..	..	501
Outstanding December, 1948 ..	..	337

Following are the particulars of notices served :—

Public Health Act ..	..	..	..	..	424
Factories Act ..	..	..	..	..	9
Shops Act ..	..	..	..	..	10
Food and Drugs Act ..	..	..	..	..	53
					—
				Total ..	496
					—

Number of complaints received ..	..	..	..	720
----------------------------------	----	----	----	-----

## SANITARY INSPECTION OF THE DISTRICT.

		<i>By</i>	<i>Without</i>	
		<i>Notice.</i>	<i>Notice.</i>	
Houses inspected <i>re</i> Disrepair	..	..	..	1985
" " <i>re</i> Infectious Disease	..	..	..	16
" " <i>re</i> Water supply	..	..	..	46
" " <i>re</i> Dirty Conditions	..	..	..	50
" " <i>re</i> Animals kept	..	..	..	25
" " <i>re</i> Sanitary Accommodation	..	..	..	64
No. of Inspections <i>re</i> Nuisances	..	..	..	573
No. of Complaints investigated	..	..	..	720
No. of Interviews (Owners, Tradesmen, etc.)	..	..	..	1395
No. of Smoke Observations	..	..	..	40
No. of Inspections of Courts and Lanes	..	..	..	177
" " <i>re</i> Tents, Vans, Sheds, etc.	..	..	..	18
" " Entertainment Houses	..	..	..	40
" " Schools	..	..	..	16
" " Offices and Workplaces	..	..	..	9
" " Factories with Mechanical Power	..	..	..	717
" " Factories without Mechanical Power	..	..	..	24
" " Factories <i>re</i> Sec. 34	..	..	..	290
" " Laundries	..	..	..	1
" " Meat Preparation Premises	..	..	..	134
" " Bakehouses—ordinary	..	..	..	82
" " Bakehouses—basement	..	..	..	5
" " Restaurant Kitchens and Cafes	..	..	..	72
" " Other Food Premises	..	..	..	222
" " Shops (Shops Act 1934)	..	..	..	182
" " Shops (Shops Acts 1912/38)	..	..	..	122
" " Meat and other Foods at Slaughterhouses	..	..	..	612
" " Meat and Other Foods at Shops and Other Premises	..	..	..	294
" " Dairies	..	..	..	134
" " Cowsheds	..	..	..	128

			By Notice.	Without Notice.
"	"	Slaughterhouses	..	347
"	"	Markets	..	116
No. of Inspections of Fried Fish Shops			..	22
"	"	Ice Cream Premises	..	112
"	"	Offensive Trade Premises	..	26
"	"	Animal Meat Shops	..	8
"	"	Stable premises	..	66
"	"	Drains	..	325
"	"	Sewers	..	23
"	"	Refuse Tips	..	61
"	"	Lavatories and Urinals	..	52
"	"	Watercourses	..	42
"	"	Common Lodging Houses	..	24
"	"	re Rats and Mice Destruction Act	..	196
"	"	re Offensive Accumulations and Refuse	..	71
"	"	re Insect Pest Control	..	31
"	"	Salvage Dumps	..	53
"	"	Depot at Bousteads Grassing	..	56
"	"	re Housing Act—General	..	39
"	"	re Housing Act—Sec. 58	..	246
"	"	re Poisons and Pharmacy Act	..	12
No. of Inspections re Factories Outworkers			..	8
No. of Miscellaneous Inspections			..	449

### WORKS EXECUTED.

#### DWELLING HOUSES :—

Rainwater spouting cleansed, made tight					
or renewed	..	..	..	185	..
Roofs stripped and re-slated	..	..	100	..	10
Roofs repaired and made watertight	..	101	..	2	
Walls—rendered or pointed	..	13	..	1	
do. — internal plaster repairs	..	32	..	3	
Ceilings—plaster repaired	..	15	..	—	
Floors—repaired or renewed	..	21	..	2	
Stairs repaired	..	3	..	—	
Doors repaired	..	12	..	—	

		<i>By</i>	<i>Without</i>
		<i>Notice.</i>	<i>Notice.</i>
Windows—repaired or sashes re-hung	..	38	.. —
Fireplaces, flues or chimneys repaired	..	28	.. 2
Skylights repaired or renewed	..	10	.. —
Yards paved or repaired	..	16	.. —
Works to remedy dampness	..	6	.. —
Sub-floor ventilation improved	..	4	.. 1
Outbuildings—structural repairs	..	14	.. 1
Coal Store provided	..	4	.. —
Scullery added to house	..	1	.. —
Water services repaired	..	4	.. —

## FACTORIES :—

Sanitary Accommodation—Provided	..	3	.. —
,,      ,,      Improved	..	7	.. —
Washing Facilities provided	..	2	.. —
Ventilation improved	..	1	.. —
Cleansed	..	1	.. —

## BAKEHOUSES :—

Cleansed and re-decorated	..	..	10	..	5
Lighting improved	..	..	1	..	—
Ventilation improved	..	..	—	..	1
Structural repairs	..	..	2	..	6
Extended and improved	..	..	1	..	2
Electric or gas ovens to replace other types	..	..	1	..	6
Hot water supply provided or repaired	..	..	1	..	3
Washing facilities improved	..	..	1	..	—

## MEAT PREPARATION PREMISES AND BUTCHERS'

## SHOPS :—

Cleansed and re-decorated	..	..	10	..	2
Ventilation improved	..	..	1	..	—
Structural repairs	..	..	7	..	1
Improved and/or extended	..	..	3	..	—

		<i>By</i>	<i>Without</i>
		<i>Notice</i>	<i>Notice</i>
Equipment and fittings cleansed and /or improved	.. .. ..	3	.. —
Hot water supply provided	.. ..	2	.. —
Insanitary practices discontinued	.. ..	2	.. —

## RESTAURANT KITCHENS

Cleansed and re-decorated	.. ..	1	.. 1
Ventilation improved	.. .. ..	1	.. 3
Structural repairs ..	.. ..	2	.. —
Extended and /or improved	.. ..	—	.. 1

## ICE CREAM PREMISES :—

Cleansed and re-decorated	.. ..	2	.. —
Improved and /or extended	.. ..	2	.. 1
Improved equipment installed	.. ..	6	.. —
Ceased sale from unsatisfactory and /or unregistered premises	.. ..	4	.. —

## FISH FRYING :—

Preparation room cleansed and /or re-decorated	3	.. 1
Shops cleansed and /or re-decorated	2	.. —

## OTHER FOOD PREMISES :—

Cleansed and redecorated	.. ..	8	.. —
Ventilation improved	.. ..	2	.. —
Structural repairs ..	.. ..	9	.. —
Hot water supply provided	.. ..	15	.. —

## MILK AND DAIRIES ORDER :—

## Dairies :—

Cleansed and /or limewashed	.. ..	— ..	10
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## Cowsheds :—

Cleansed and /or limewashed	.. ..	— ..	14
Structural repairs ..	.. ..	2 ..	—

	<i>By</i>	<i>Without</i>
	<i>Notice.</i>	<i>Notice.</i>

SHOPS ACT, 1934 :—		
Sanitary Accommodation provided and /or improved	.. .. ..	15 .. —
Washing Facilities provided and /or improved	.. .. ..	11 .. —
Ventilation improved	.. .. ..	3 .. —
Heating improved	.. .. ..	2 .. —
Unsatisfactory shops closed	.. .. ..	1 .. —

## DRAINAGE :—

New drains constructed	.. .. ..	16 .. —
Cleansed or repaired	.. .. ..	78 .. 5
Opened out for inspection	.. .. ..	8 .. 1
Interception traps installed	.. .. ..	4 .. —
Manholes installed	.. .. ..	5 .. 1
Rodding eyes installed	.. .. ..	4 .. —
Self-cleansing gullies provided to replace obsolete or defective gullies	.. .. ..	36 .. 1
Gullies fitted to untrapped rainwater spouts	.. .. ..	17 .. 1
New soil pipes installed	.. .. ..	3 .. —
Disused drains sealed	.. .. ..	2 .. —
Smoke, chemical or water tested	.. .. ..	— .. 16

## SINKS AND OTHER SANITARY FITTINGS :—

New sinks installed	.. .. ..	43 .. 1
Baths or W.H.B.'s installed	.. .. ..	10 .. 4
New trapped waste pipes	.. .. ..	40 .. 5
Waste pipes repaired	.. .. ..	4 .. —

		<i>By</i>	<i>Without</i>
		<i>Notice.</i>	<i>Notice.</i>
<b>WATER CLOSETS :—</b>			
Cleansed or repaired	.. .. ..	11	.. —
New W.Cs, provided (complete)	.. ..	13	.. 2
Ped. W.Cs. provided to replace obsolete or defective fittings	.. .. ..	25	.. 2
New flushing cisterns	.. .. ..	6	.. 2
Flushing cisterns repaired	.. .. ..	19	.. —
Soil and vent pipes provided	.. .. ..	4	.. 1
Disused W.Cs. removed and drains sealed	.. .. ..	4	.. —
W.C. apartments repaired	.. .. ..	14	.. 1
<b>URINALS :—</b>			
Cleansed or repaired	.. .. ..	—	.. 23
New installed	.. .. ..	—	.. 1
<b>PREMISES OF PUBLIC RESORT—CINEMAS, HALLS, THEATRES, PUBLIC HOUSES, &amp;c. :—</b>			
Cleansed and /or re-decorated	.. .. ..	1	.. —
Sanitary Accommodation improved	.. .. ..	3	.. —
Ventilation improved	.. .. ..	1	.. —
<b>COURTS AND LANES :—</b>			
Paving repaired or renewed	.. .. ..	3	.. —
Cleansed	.. .. ..	1	.. —
<b>TENTS VANS, SHEDS, &amp;c. :—</b>			
Removed from unlicensed sites	.. .. ..	1	.. —
<b>RODENT CONTROL :—</b>			
Works at Dwelling houses	.. .. ..	8	.. —
Works at other premises	.. .. ..	2	.. —
<b>OFFENSIVE ACCUMULATIONS :—</b>			
Removed	.. .. .. .. ..	10	.. —
Signs prohibiting deposit erected	.. .. ..	1	.. —
<b>WATER COURSES :—</b>			
Cleansed	.. .. .. .. ..	1	.. —

		<i>By</i>	<i>Without</i>		
		<i>Notice.</i>	<i>Notice.</i>		
COMMON LODGING HOUSES :—					
Cleansed and re-decorated	..	..	1	..	1
Structural repairs	..	..	1	..	1
Repairs to Sanitary Accommodation	..	2	..	—	
WATER SUPPLY :—					
New piped supply installed in house	..	18	..	—	
Service pipes and taps repaired	..	13	..	—	
NUISANCES :—					
re Unsatisfactory keeping of animals, abated		3	..	—	
Arising from Emission of smoke, abated ..		1	..	—	
MISCELLANEOUS :—					
Not classified above	..	..	..	9	..

## APPENDIX II.

### FOOD AND DRUGS ACT.

The following are the particulars relating to samples submitted to the Public Analyst :—

Article	No. of Samples	No. found to be genuine	No. adulterated
Milk .. .. ..	17	16	1
Cereals .. ..	2	2	—
Condiments and Flavourings	25	25	—
Tea, Coffee .. ..	13	13	—
Table Jelly .. ..	6	6	—
Meat and Fish Products ..	7	7	—
Ice Cream Powder ..	1	—	1
Patent Flour Mixtures ..	3	3	—
Non-Alcoholic Beverages and Essences .. ..	5	5	—
Potted Meat .. ..	3	3	—
Miscellaneous .. ..	15	15	—
Total ..	97	95	2

## MEAT INSPECTION.

The following tables give the number of animals killed annually during the past three years :—

## Public Slaughter-Houses.

Year	Cattle	Sheep & Lambs		Calves	Pigs	Total
		Lambs	Sheep			
1946	4,896	21,584		2,784	159	29,423
1947	4,090	13,460		4,086	75	21,711
1948	3,617	16,219		2,277	103	22,216

## Harraby Bacon Factory.

1946	—	—	3,318	39,728	43,046
1947	—	—	—	23,355	23,355
1948	—	—	—	33,045	33,045

## Public Slaughter-Houses.

## CARCASSES INSPECTED AND CONDEMNED.

	Cattle			Sheep and Lambs		Pigs
	ex- cluding Cows	Cows	Calves			
Number killed (if known) . .	2259	1358	2277	16,219	103	
Number Inspected . .	2259	1358	2277	16,219	103	
<i>All Diseases except Tuberculosis.</i>						
Whole Carcasses Condemned . .	24	71	171	164	5	
Carcase of which some part or organ was condemned . .	1712	1106	20	4114	71	
Percentage of the number inspected affected with disease other than tuberculosis . . .	76.8	86.7	8.4	26.4	73.8	
<i>Tuberculosis only.</i>						
Whole carcases condemned . .	9	62	18	—	1	
Carcase of which some part or organ was condemned . .	165	291	1	—	4	
Percentage of the number inspected affected with Tuberculosis . .	7.7	26.0	0.8	—	4.9	

Table showing number of Carcasses and Part Carcasses condemned for diseases other than Tuberculosis.

DISEASE OR CONDITION	Unfit for Food.							
	Whole Carcasses.				Part Carcasses.			
	Cattle.	Sheep.	Pigs.	Calves.	Cattle.	Sheep.	Pigs.	Calves.
Arthritis, Atrophy ..	2	12	—	—	14	64	8	—
Actinomycosis ..	3	—	—	—	3	—	—	—
Abscesses and Suppurative Conditions .. ..	1	4	—	1	9	8	—	1
Anaemia .. ..	1	36	—	—	—	—	—	—
Black Quarter .. ..	1	—	—	—	—	—	—	—
Cancer and Tumours ..	6	1	—	—	1	—	—	—
Enteritis .. ..	—	2	1	2	—	—	—	—
Emaciation, Ill-set ..	39	44	2	3	—	—	—	—
Febrile condition, Ill-bled ..	2	9	1	11	—	—	—	—
Immaturity, Foetal ..	—	2	—	41	—	—	—	—
Inflammatory diseases :—								
Pneumonia, Pleurisy, Peritonitis, etc. ..	3	7	1	15	4	53	1	—
Injuries, Accidents, &c. ..	6	15	—	8	271	60	20	7
Jaundice .. ..	—	—	—	1	—	—	—	—
Johne's Disease ..	11	—	—	2	—	—	—	—
Lymphadenitis ..	1	—	—	—	—	—	—	—
Malnutrition .. ..	—	3	—	47	—	—	—	—
Mastitis .. ..	4	2	—	—	14	6	7	—
Nephritis .. ..	1	—	—	3	15	2	3	—
Odour .. ..	5	1	—	1	—	—	—	—
Oedema .. ..	—	18	—	4	8	18	—	—
Post-mortem putrefaction ..	—	5	—	—	—	2	1	—
Pyaemia, Joint Ill, Navel Ill ..	1	—	—	24	—	—	—	—
Sapraemia .. ..	3	—	—	—	—	—	—	—
Septicaemia and other Septic Conditions .. ..	3	2	—	1	—	—	1	—
Septic Pericarditis .. ..	2	—	—	3	1	—	—	—
Swine Erysipelas .. ..	—	—	—	—	—	—	3	—
Uræmia .. ..	—	1	—	1	—	—	—	—
White Scour .. ..	—	—	—	3	—	—	—	—
Whole Carcasses ..	95	164	5	171	—	—	—	—
Part Carcasses ..	—	—	—	—	340	213	44	8

## DISEASED AND UNSOUND FOOD.

The following table shows the amount of food declared to be unfit for consumption during 1948 :—

		Tons	Cwts.	Qrs.	Lbs.	
<b>PUBLIC SLAUGHTERHOUSES.</b>						
Beef .. ..	35	1	3	6		
Offals .. ..	37	11	2	1		
Mutton .. ..	3	1	1	27		
Offals .. ..	3	4	2	7		
Veal .. ..	3	10	1	27		
Offals .. ..	1	1	2	22		
Pork .. ..	—	16	—	17		
Offals .. ..	—	3	2	14	Tons	Cwts. Qrs. Lbs.
					84	11 1 9
<b>HARRABY BACON FACTORY.</b> Tons Cwts. Qrs. Lbs.						
Pork .. ..	2	16	1	18		
Offals .. ..	1	—	2	26	Tons	Cwts. Qrs. Lbs.
					3	17 — 16
<b>OTHER SOURCES.</b> Tons Cwts. Qrs. Lbs.						
Meat .. ..	—	19	3	3		
Meat Products .. ..	1	—	3	6		
Fish .. ..	—	13	—	17		
Tinned Meat .. ..	—	10	2	10		
Bread and Cereals .. ..	1	8	1	3		
Fruit and Vegetables .. ..	1	11	1	1		
Miscellaneous .. ..	2	9	—	6	Tons	Cwts. Qrs. Lbs.
					8	12 3 18
					Total	97 1 1 15

Other tinned foods :— 6,850 tins.

## COMMON LODGING HOUSES.

There are four registered Common Lodging-Houses in the City, one of which is owned and managed by the Corporation, their location are as follows :—

Lowther House, Lowther Street ..	Carlisle Corporation.
17 Castle Street .. ..	T. Porter.
Hostel Lindisfarne Street. ..	Mrs. T. Porter.
10 Abbey Street .. ..	John Walker,

## FACTORIES ACT, 1937.

## 1.—Inspections for purposes of provisions as to health (including Inspections made by Sanitary Inspectors.

Premises.	Number on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities .. ..	184	24	1	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority .. ..	339	717	4	—
(iii) Other Premises in which Section 7 is enforced by the Local Authority † (excluding out-workers' premises) .. .. ..	—	—	—	—
<b>TOTAL</b> .. ..	<b>523</b>	<b>741</b>	<b>5</b>	—

## 2.—Defects found,

Particulars.	Number of cases in which defects were found.				Number of cases in which prosecutions were instituted	
	Found	Remedied	Referred To H.M. Inspector			
			By H.M. Inspector			
Want of cleanliness (S.1) ..	—	2	—	—	—	
Overcrowding (S.2) ..	—	—	—	—	—	
Unreasonable temperature (S.3) .. ..	—	—	—	—	—	
Inadequate ventilation (S.4) ..	—	1	—	—	—	
Ineffective drainage of floors (S.6) .. ..	1	—	—	—	—	
Sanitary Conveniences (S.7) :						
(a) insufficient .. ..	6	1	—	2	—	
(b) Unsuitable or defective ..	2	10	—	1	—	
(c) Not separate for sexes ..	2	1	—	1	—	
Other offences against the Act (not including offences relating to Outwork) .. ..	—	—	—	—	—	
<b>TOTAL</b> .. ..	<b>11</b>	<b>15</b>	<b>—</b>	<b>4</b>	—	

† i.e. Electrical Stations [Section 103 (1)], Institutions. (Section 104) and sites of Building Operations and Works of Engineering Construction (Sections 107 and 108).

## OUTWORK.

Nature of work	Section 110		Section 111	
	No. of out-work-ers in Aug. list require- d by Sect. 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecu- tions for failure to supply lists	No. of instances of work in unwhole- some premises
Wearing . . . Making, etc. apparel . . . Cleaning and Washing	..	2	—	—
Total	..	2	—	—



